

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60492

FILED
Mar 02, 2009
Secretary of State

Entity Name: DEAS BROTHERS FARMS, INC.

Current Principal Place of Business:

4502 NW 20 DR
JENNINGS, FL 32053

New Principal Place of Business:

Current Mailing Address:

4502 NW 20TH DR
JENNINGS, FL 32053

New Mailing Address:

FEI Number: 59-2536109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAS, DAMON
5050 NW 20TH DR
JENNINGS, FL 32053 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: DEAS, ALBERT,
Address: 4040 NW CR 146
City-St-Zip: JENNINGS, FL 32053

Title: DP () Delete
Name: DEAS, DAMON,
Address: 5050 NW 20TH DR
City-St-Zip: JENNINGS, FL 32053

Title: DT () Delete
Name: DEAS, ROGER,
Address: 4502 NW 20TH DR
City-St-Zip: JENNINGS, FL 32053

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER DEAS

DT

03/02/2009

Electronic Signature of Signing Officer or Director

Date