

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H62675

Entity Name: FERN FARMS, INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

15129 JOHN'S LAKE ROAD
P.O. BOX 338
CLERMONT, FL 34711 US

New Principal Place of Business:

15129 JOHN'S LAKE ROAD
CLERMONT, FL 34711 US

Current Mailing Address:

C/O PATRICIA R. BODIFORD
P. O. BOX 338
OAKLAND, FL 347600338 US

New Mailing Address:

FEI Number: 59-2541428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODIFORD, PATRICIA R
315 N TUBB ST
OAKLAND, FL 34760 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: PD () Delete
Name: BODIFORD, PATRICIA R.
Address: 315 N TUBB ST.
City-St-Zip: OAKLAND, FL

Title: STD () Delete
Name: BODIFORD, HOMER A.,
Address: 315 N TUBB ST.
City-St-Zip: OAKLAND, FL

Title: VPD () Delete
Name: BODIFORD, BRYON R.,
Address: 15129 JOHNS LAKE ROAD
City-St-Zip: CLERMONT, FL 34711

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 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: PATRICIA R BODIFORD

PD

01/09/2007

Electronic Signature of Signing Officer or Director

Date