

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H95862

1. Entity Name
PEA RIDGE FARM, INC.

Principal Place of Business
1668 MCKAY COURT
DUNEDIN FL 34698

Mailing Address
1668 MCKAY COURT
DUNEDIN FL 34698

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90066 033 ***150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2686887

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TOTTLE, DAVID CPA

~~2002-2003 FEE DEDUCTIBLE~~ 5044 KILKENNEY CT.
~~DUNEDIN FL 34698~~ OLDSMAR, FL 34677

Name

Street Address (P.O. Box Number is Not Acceptable)

5044 KILKENNEY CT.

City

OLDSMAR, FL.

FL

Zip Code

34677

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DV ☐ Delete
NAME YAKLE, LINDA E.
STREET ADDRESS 5910 N SUWANEE
CITY-ST-ZIP TAMPA FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DPC ☐ Delete
NAME YAKLE, STEVEN R.
STREET ADDRESS 25330 ISLAND VIEW DRIVE
CITY-ST-ZIP COHASSETT MN

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME SCHMITZ-ROXIE E-YAKLE
STREET ADDRESS 3524 OAK HILL TRAIL
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME YAKLE, JAMES R.
STREET ADDRESS 1668 MCKAY CT.
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME YAKLE, BETTY G.
STREET ADDRESS 1668 MCKAY CT.
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Betty G. Yakle, Sec.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 15, 2002 727-733-0096
Date Daytime Phone #

CR2E034 (9/01)