

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2003 8:00 am
Secretary of State

08-01-2003 90063 018 ***150.00

DOCUMENT # J77046

1. Entity Name
LITTLE FARM PROPERTIES, INC.



Principal Place of Business
1904 5TH CT SE 8500 Bisc Blvd
VERO BEACH FL 32962 Miami Fla
33138

Mailing Address
1904 5TH CT SE P.O. Box 189
VERO BEACH FL 32962 Damascus, Ohio
44619



2. Principal Place of Business
8500 Biscayne Blvd.
Suite, Apt. #, etc.
Miami
City & State
Fla

3. Mailing Address
P.O. Box 189-15821 Danbury
Suite, Apt. #, etc.
Damascus
City & State
Ohio

CHECK HERE IF MAKING CHANGES

Zip **33138** Country **USA**

Zip **44619** Country **USA**

4. FEI Number **59-2829953**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
ROCKMAN, LOUIS M.
8500 SW 92 ST
SUITE 106
MIAMI FL 33156

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHAUFLE, JACK 5154 ISLAND VIEW CIRCLE, NORTH POLK CITY FL 33868	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHAUFLE, NANCY 5154 ISLAND VIEW CIR NORTH POLK CITY FL 33868	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SCHAUFLE, NANCY 5154 ISLAND VIEW CIRCLE, NORTH POLK CITY FL 33868	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EDMONDS, EDWIN 3050 N.E. 39TH ST. FT. LAUDERDALE FL 33308	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Schaufele, Jack P.O. Box 189 15821 Danbury Damascus, Ohio 44619	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Schaufele, Nancy P.O. Box 189 15821 Danbury Damascus, Ohio 44619	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Schaufele, Nancy P.O. Box 189 15821 Danbury Damascus, Ohio 44619	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy Schaufele **SIGNATURE REQUIRED** Nancy Schaufele Sec. of State **7/29/03** **330-537-3910**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Attachment

80135482

PHONE: 754-3303

#J77046

LITTLE FARM PROPERTIES, INC.

8500 BISCAYNE BOULEVARD
MIAMI, FLORIDA 33138

7/29/03

Division of Corporations
Uniform Business Report Filings

P.O. Box 1500

Tallahassee, Fla. 32302-1500

Re: J77046

To Whom It May Concern:

Please be advised that we did not receive the original Uniform Business Report. If you would be so kind as to accept this letter as our request to serve as a Waiver for late filing fee.

Please find our Ch# 12619, dated 7/29/03 as our payment for the Uniform Business Report.

Thanks again for your kind consideration in this matter.

Very Truly Yours,

Little Farm Properties, Inc.

Nancy Schaufele, Sec. Treas.

Enclosure