

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J85115

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** RIVERDALE POTATO FARM, INC.

**Current Principal Place of Business:**

7399 ATLANTIC ROAD  
ST AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 170  
ELKTON, FL 32033

**New Mailing Address:**

**FEI Number:** 59-2834388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES, RICHARD H.  
3061 MAC ROAD  
SAINT AUGUSTINE, FL 32086 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

**OFFICERS AND DIRECTORS:**

**Title:** DV  
**Name:** JONES, DAVID E.  
**Address:** 71 GENE JOHNSON ROAD  
**City-St-Zip:** SAINT AUGUSTINE, FL 32080

**Title:** VTAS  
**Name:** JONES, JEAN B.  
**Address:** 71 GENE JOHNSON RD.  
**City-St-Zip:** SAINT AUGUSTINE, FL 32080

**Title:** P  
**Name:** JONES, RICHARD H.  
**Address:** 3061 MAC ROAD  
**City-St-Zip:** ST. AUGUSTINE, FL 32086

**Title:** V  
**Name:** JONES, ALAN E.  
**Address:** 7623 ALISTER MACKENZIE DRIVE  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** S  
**Name:** CHESHIRE, GEORGIA J  
**Address:** 13950 CR 13 NORTH  
**City-St-Zip:** ST. AUGUSTINE, FL 32092

I hereby 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 all other like empowered.

**SIGNATURE:** RICHARD H JONES

P

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date