FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

| MENT # K23045 ROUGHBRED FARM, INC. | | | | | | | | |
|--|--|--|---|--|---|--|--|--|
| e of Business | Mailing Add | ress | • | - | II 8011: BEBBI BILI DIDII 111 | | | |
| | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | · · | ualifed | | | |
| | | | | | | | | |
| Place of Business | ⊢ - | Address | | – | | | | į, v |
| | | | | 59-2881515 | | | | Ş |
| #. etc. <u></u> | <u> </u> | ot. #, etc | | 5. Certifcate of Status De | sired 🗌 | | | |
| | | t-t- | | | | | | |
| le . | ⊢ ' | late | • | | * 11 | • | | |
| Country | | | Country | | | | | |
| | | | oounu, | , | • | ngible □Yes | XINO | |
| | | 11 | | | | | | |
| A Month of the last of the | | - | 81 Name | | | -F | | |
| FRY, DONALD | | | 82 Street Addr | ess (P.O. Box Number is Not | Acceptable) | - | | |
| 1417 100111 01. | | | | to a large season | n kai i yuanti sang syaga yan | k k eleke kingê e | | |
| ILA FL 34473 | | | 83 | | | | | |
| | | • | 84 City | , 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 85 Zip C | óde | |
| the section of the contract of | W. P. Con | 71 mg 47 11 | | | <u> </u> | | | |
| to the provisions of Sections 607.0502 egistered agent, or both, in the State or irm familiar with, and accept the obligation | f Florida. Such cons of, Section 6 | riorida Statutes, ti hange was autho 607.0505, Florida | ne above-named corporation rized by the corporation Statutes. | oration submits this statement on's board of directors. I heret | by accept the appoint | ment as reg | gistered | |
| Signature, typed or printed name of registered agent | | | | | | | | |
| | and title if applicable. | (NOTE: Regit | stered Agent signature required | d when reinstating) | DATE | | | ź |
| OFFICERS AND | | | stered Agent signature required | d when reinstating) (1775) ADDITIONS/CHANGES | | DIRECTO | RS IN 12 | Ó |
| PDS | DIRECTORS | | | | | DIRECTO | RS IN 12 | 100,447 |
| PDS TREFRY, DONALD | DIRECTORS | DELETE | 13. | ADDITIONS/CHANGES | | | | 144.000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS | DELETE | 13. 1.1 TITLE | ADDITIONS/CHANGES | | | | 1001 4 4 V VODI |
| PDS TREFRY, DONALD | DIRECTORS [| □ DELETE | 13. 1.1 TITLE 1.2 NAME | ADDITIONS/CHANGES | | Change | ☐ Addition . | |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS [| □ DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | ADDITIONS/CHANGES | | | | 0000 444 WOOL |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS [| DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | ADDITIONS/CHANGES | | Change | ☐ Addition . | 100000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS [| DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE | ADDITIONS/CHANGES | | Change | ☐ Addition . | TOUR AN ACONOMIC |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS | □ DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | ADDITIONS/CHANGES | | Change | Addition | 1000 FF/ FCOLOGO |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS | DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE | ADDITIONS/CHANGES | | Change | ☐ Addition . | 144 (00) |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS | DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME | ADDITIONS/CHANGES | | Change | Addition | 1000 A 44 (600) |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | 1000000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET | DIRECTORS | DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | 1000000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | 1000000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | 100177170010010 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ADDITIONS/CHANGES | TO OFFICERS AND | Change Change Change | Addition Addition Addition | 1001 FF1 7,00L0QO |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | ADDITIONS/CHANGES | TO OFFICERS AND | Change | Addition Addition | 10017717000000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME | ADDITIONS/CHANGES | TO OFFICERS AND | Change Change Change | Addition Addition Addition | 100/17/1004000 |
| PDS TREFRY, DONALD 301 NORTHWEST 100 STREET OCALA FL | DIRECTORS | DELETE DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | ADDITIONS/CHANGES | TO OFFICERS AND | Change Change Change | Addition Addition Addition | 100/ FF7 F00 L000 |
| | ROUGHBRED FARM, INC. e of Business ST 100 STREET 75 Place of Business #, etc. c Country 25 9. Name and Address of Current FRY, DONALD NW 100TH ST: | ROUGHBRED FARM, INC. a of Business ST 100 STREET 75 CALA FL 3 US Mailing Add NORTHM OCALA FL 3 US Mailing Add ST 100 STREET OCALA FL 3 US Tace of Business 2a. Mailing Add 26 Suite, Ap 27 a City & S 28 Country Zip 29 9. Name and Address of Current Registered Age FRY, DONALD NW 100TH ST. LA FL 34475 | ROUGHBRED FARM, INC. a of Business ST 100 STREET TO CALA FL 34475 US Place of Business 2a. Mailing Address 2b. Lace of Business 2a. Mailing Address 2b. Lace of Business 2a. Mailing Address 2b. Coulty State 2c. 2c. 2d. Lip 2c. 2d. Suite, Apt. #, etc. 2c. 2c. 2c. Lity & State 2c. 2c. 2c. 2c. 2c. 2c. 2c. 2d. Suite, Apt. #, etc. 2c. 2c. 2c. 2c. 2c. 2c. 2c. | ROUGHBRED FARM, INC. a of Business ST 100 STREET To CALA FL 34475 US Mailing Address 301 NORTHWEST 100 STREET OCALA FL 34475 US Mailing Address 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 27 28 City & State 28 Country 25 29 30 9. Name and Address of Current Registered Agent FRY, DONALD NW 100TH ST. NAME 82 Street Address 84 City | ROUGHBRED FARM, INC. a of Business ST 100 STREET 75 OCALA FL 34475 US DO NO. 3. Date Incorporated or C 05/10/1988 lace of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing Address 2d. Mailing Address 2f. Suite, Apt. #, etc. 27 59-2881515 #, etc. 27 5. Certificate of Status De 28 Country 29 30 Personal Property Tax 9. Name and Address of Current Registered Agent 10. Name and Address of P.O. Box Number is Not NW 100TH ST: UA FL 34475 83 Street Address (P.O. Box Number is Not | ROUGHBRED FARM, INC. e of Business ST 100 STREET 75 OCALA FL 34475 US DO NOT WRITE IN THIS S 3. Date Incorporated or Qualifed 05/10/1988 lace of Business 2a. Mailing Address 2b. Let Suite, Apt. #, etc. 27 e City & State 28 City & State 29 30 Country 25 29 30 Name and Address of Current Registered Agent ST PONALD NW 100TH ST. LA FL 34475 Bailing Address 4. FEI Number 59-288 15 15 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Country 21p Country 28 10. Name and Address of New Registered Agent 81 Name RY, DONALD NW 100TH ST. LA FL 34475 | ROUGHBRED FARM, INC. a of Business ST 100 STREET 75 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/10/1988 1ace of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 Country 2c. Suite, Apt. #, etc. 27 Country 2s | ROUGHBRED FARM, INC. a of Business ST 100 STREET 75 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/10/1988 4. FEI Number 26 #. etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 28 Country 29 30 Country 25 Country 25 28 Country 27 Country 28 Country 29 30 Personal Property Tax. 9 Name and Address of Current Registered Agent B1 Name Street Address (P.O. Box Number is Not Acceptable) B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) |

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, on on an attachment with an actives, with an other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME

SIGNATURE:

NAME STREET ADDRESS

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90051 038 ***150.00