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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

FLEMING'S FARM, INC.

FILED										
Apr	10	1998	8:00am							
Se	cre	tary o	f State							

Principal Place of Business Mailing Address						E 10810311 610 11041 81011 10581 81110	#101 #12 11 # 11		1811 1891
6441 U.S. 19 6441 U.S. 18 P.O. BOX 212 P.O. BOX 212 TERRA CEIA FL 34250-0212 TERRA CEIA FL 34250-0212			12		DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified			
	3 5 1 1 1 5					05/23/1988			
		2. Principal Place of Business 2a. Mailing Address				4. FEI Number		— —	ied For
21 26					65-0060908			Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired		\$8.75 Ad Fee Requ			
l	City & State	e	City & State			6. Election Campaign Financing		\$5.00 м	ay Be
I	23		28			Trust Fund Contribution		Added to	Fees
İ	Ζίρ 24	Country 25	Ζίρ 29	Country 30	y	This corporation owes or has p Personal Property Tax due Jun		urrent year Intan	•
I		9, Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered	J Agent	
	FLE	EMING, GLENN		81	Name				
		BAYSHORE DRIVE		82	Street Ad	dress (P.O. Box Number is Not Accepta	able)	T-1-1	
TERRA CEIA FL 34250			63						
				84	City			Jan 3:- 0-	
I				04	City		FI	85 Zip Co	ae
	11. Pursuant to office or re agent. Lar	o the provisions of Sections 607.05 egistered agent, or both, in the Stal m familiar with, and accept the obli	i02 and 607.1508, Florida Sta tute te of Florida. Such change was a gations of, Section 607.0505, Flo	s, the abov uthorized b rida Statute	e-named co y the corpor s.	orporation submits this statement for the ation's board of directors. I hereby according	purpose ept the ap	of changing its repointment as re-	egistered gistered
I	SIGNATURE	Signature, typed or printed name of registered a	cont and little if applicable /NOTE	Registered An	ent signalura sag	quired when reinstating)	DATE		
l	12.		ND DIRECTORS	13.					
	TITLE	DST	☐ DELETE	1.1 TITLE				Change	Addition
	NAME	FLEMING, GLENN		1.2 NAME					
I	STREET ADDRESS	400 BAYSHORE DRIVE		1.3 STREET	I ADDRESS				
ı	CITY-ST-ZIP	TERRA CEIA FL		1.4 CITY - 1	ST-ZIP				
l	TITLE	DP	DELETE	2.1 TITLE				Change	Addition
I	NAME	FLEMING, R.G., JR.		2.2 NAME					
İ	STREET ADDRESS	1504 TERRA CEIA ROAD		2.3 STREET	T ADDRESS				
ļ	CITY-ST-ZIP	TERRA CEIA FL		2. 4 CITY-	ST-ZIP				
I	TITLE	DVP	☐ DELETE	3.1 TITLE				Change	Addition
I	NAME	FLEMING, SHEREE L.		3.2 NAME					
I	STREET ADDRESS	1504 TERRA CEIA ROAD		3.3 STREET	ADDRESS				
ŀ	CITY-ST-ZIP	TERRA CEIA FL	···	3.4. CITY-	ST-ZIP				
ĺ	TITLE	DVP	DELETE	4.1 TITLE				Change [Addition
ı	NAME	FLEMING, ZUE C.		4. 2 NAME					
ĺ	STREET ADDRESS	400 BAYSHORE DR		4.3 STREET	ADDRESS				
ĺ	CITY-ST-ZIP	TERRA CEIA FL	T DE	4.4 CITY-S	ST - ZIP				
١	TITLE		☐ DELETE	5.1 TITLE				Change	Addition
	NAME			5.2 NAME					

14. 1 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, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST - 7IP

6.1 TITLE

6.2 NAME

DELETE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

Change

Addition