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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K66678

(9)

GREENRIDGE FARM, INC.

FILED Mar 18 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				Delian Ariki Madak		ANDIN BURUN AN	DEE BINDS HAEL	
			2120 KILLARNEY WAY TALLAHASSEE FL 32317-2458			O NOT WRITI	E IN THIS SI	PACE		
US		US			3. Date Incorporated 02/17/1989	I or Qualified				
2. Principal Pla	ace of Business	2a. Mailing Address	. Mailing Address					I A	pplied For	
<u> </u>		26	26			0		N/	ot Applicable	
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.				us Desired			Additional equired	
City & State		City & State				n Financing			May Be	
3		28				bution			to Fees	
Zip	Country	Zip	¬ ' — ¬		or ma corporation of the part					
		29	30			Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent				
100	9. Name and Address of Current	·	61 Name		SS OT NOW H	agistered A	gent			
WARFEL, TIMOTHY J.				YVa	Warfel, Timothy J.					
	20 KILLARNEY WAY 5 SOUTH MONROE STREET			82 S29	t Address (P.O. Box Number is L20 Killarney Way	Not Accepta	ble)			
	LLAHASSEE FL 32317			83						
			İ	84 City	Tallahassee		FL	85 Zip	Code 2.308	
11. Pursuant to	o the provinions of Sections #97.0502	and 607.1508. Florida Statut	es, the a	DOVE-name		ement for the		changing i	ts registered	
office or re	o the provisions of Sections en7.050? gistered gent, or both, in the State in familie With, and secent the obligation	I Florida Such change was	authorize	d by the co	orporation's board of directors.	hereby acce	pt the appo	intment as	registered	
DIÓNATI IDE	Sunt IVM		onda bid							
SIGNATURE :	Signature, typed or printed name / registered agric	i and title v applicable (NO)	E: Registere	d Agent signat	ure required when reinstating)		DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHAN	GES TO OFFI				
TITLE	D	☐ DELETE	1.1 70	TLE			Ī	Change	☐ Addition	
NAME	BARWICK, WILLIAM LEE, JR		1.2 N						l l	
STREET ADDRESS	4721 OZELL RD			REET ADDRESS	S				ļi	
CITY-ST-ZIP			_	TY-ST-ZIP			 -	Change	- Addison	
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NAME			22 N						-	
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NAME		F-3 5225.15	3.2 N				•			
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CITY-ST-ZIP				ITY-ST-ZIP					!	
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NAME			5.2 N	AME					*	
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CITY-ST-ZIP				TY-ST-ZIP	<u> </u>				1 1 101	
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NAME			6.2 N						•	
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Thereby 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 informatio 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.

SIGNATURE: William & en Longuet On William)