## 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 # L44926

(8)

PELICAN LAKE TREE FARMS, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address		t ladifálf Bis Bibli arata tabla tidia distributi atati atati atati atati atati
C/O OASIS TREE FARMS		C/O OASIS TREE FARMS			
P.O. BOX 539		P.O. BOX 539			DO NOT WRITE IN THIS SPACE
PAHOKEE FL 33476		PAHOKEE FL 33476	PAHOKEE FL 33476		3. Date Incorporated or Qualified
					01/25/1990
9 Princins	at Place of Business	2a. Mailing Address			4. FEI Number Applied For
21 26					65-0171667 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		- \$8.75 Additional
22			27		5. Certificate of Status Desired Fee Required
City & State		City & State	4		6. Election Campaign Financing \$5.00 May Be
23		28	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible
24	25	29 30			Personal Property Tax due June 30. 🔀 Yes 🔲 No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
•	YUSEM, RICHARD		81	Name	
C/O OASIS TREE FARMS			82	Street	Address (P.O. Box Number is Not Acceptable)
372 BARFIELD HWY				ļ	
	PAHOKEE FL 33476		83		
			84	City	85 Zip Code
			07	City	FL   S   Z   COOLS
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATUR	Signature, typed or purified name of registered	source and tallo if analyzatile (NOT)	F Required Arr	ont signature	e required when reinstating) DATE
12,		AND DIRECTORS	13.	···· orginalare	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE		Change Addition
NAME	BROOKS, ALVIN EUGENE		1.2 NAME		
STREET ADDRE			1.3 STREE	ADORESS	
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-	S1-7IP	
TITLE	Ð∀	<b>▼</b> DELETE	2.1 TITLE		Change Addition
NAME	EBERSOLD, RICHARD F.		2.2 NAME		
STREET ADDRE			2.3 STREE	ADDRESS	4
CITY-ST-ZIP	BOGA RATON FL		2. 4 CITY-	\$1-ZIP	
TITLE	DTS	☐ DELETE	3.1 TITLE		Change Addition
NAME	YUSEM, RICHARD G.		3.2 NAME		
STREET ADDRE	***		3.3 STREE	I ADDRESS	389 Oregen Lane
QTY-ST-ZIP	BOCA RATON FL		3.4 CITY-	ST-ZIP	389 Oregon Lane Boca RATON FL 33487
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRE	ss		4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRE	ss		5.3 STREE	1 ADORESS	
CITY-ST-ZIP			5.4 CiTY-1	ST-ZIP	
TITLE		DELETE	6.1 71TLE	. —	Change Addition
NAME			6 2 NAME		
STREET ADDRE	ss		6.3 STREE	ADDRESS	
CITY-ST-ZIP			6.4 CITY		
14. I herel	by certify that the information supplied	with this filing does not qualify for	or the exemp	otion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or supplymental annual seport 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 of the decirer 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 in a factorist with an address.					