2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# L47569

Entity Name: GLENN FARMS, INC.

Current Principal Place of Business:

%JUDY GLENN
353 SW HUGH LOOP
FORT WHITE, FL 32038

New Principal Place of Business:

Current Mailing Address:

%JUDY GLENN
P O BOX 217
FORT WHITE, FL 32038

New Mailing Address:

FEI Number: 59-3015458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLENN, JUDY
367 SW KAYLA CT
FORT WHITE, FL 32038 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: VP ( ) Delete
Name: GLENN, MARTHA J,
Address: PO BO X 66
City-St-Zip: FT WHITE, FL 32038

Title: P/S ( ) Delete
Name: GLENN, JUDY,
Address: 367 SW KAYLA COURT
City-St-Zip: FT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: GLENN, DEWEY V,
Address: PO BO X 66
City-St-Zip: FT WHITE, FL 32038

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUDY GLENN P/S 03/05/2009

Electronic Signature of Signing Officer or Director — Date