## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L83158  1. Entity Name HUNSADER FARMS, INC.					Jan 28, 2000 8:00 am Secretary of State 01-28-2000 90152 050 ***150.00		
HUNSADER FAI 208 25TH STRE	DER FARMS INC HUNSADER FARMS INC HI STREET W TON FL 34202  Mailing Address HUNSADER FARMS INC 208 25TH STREET W BRADENTON FL 34205-4916 US						
<i>Hunsa</i> Suite, Apt.	2. Principal Place of Business  HUNSAder Farms Inc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
Bradenton, Fl.		City & State		4.	FEI Number 65-0202191	No	oplied For ot Applicable
3420	Country Manatee  6. Name and Address of Current	Zip Registered Agent.	Country		Certificate of Status Desired  Name and Address of New Regist	Fee Require	
MCGUIRE AND PARRY 1001 - 3RD AVENUE WEST SUITE 600 BRADENTON FL 34205			<u> </u>	Name Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code			
SIGNATURE .  9. This corporate filing r	named entity submits this statement for signature, typed or printed name of registered agent a contain is eligible to satisfy its Intangible equirement and elects to do so.	and title if applicable. , (NOTE	: Registered Agent sig !! FEE IS \$15 00 Fee will be	inature required when 0.00 \$550.00			May Be
11.	OFFICERS AND		12.		DDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HUNSADER, JOSEPH H. 2001 - 39TH ST. W. BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	Presidents 208		· Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNSADER, MICHAEL T. 10013 OAK RUN DR. BRADENTON FL	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	Sec   Hunsaa 6320	Tres der, Michael T. 205 II St. E. nton, Fl. 34202	Change	Addition
TITLE"  NAME  STREET ADDRESS  CITY-ST-ZIP	D HUNSADER, DAVID J. 4904 - 31ST ST. E. BRADENTON FL	☐ Oelete	TITLE NAME STREET ADDRES GITY-ST-ZIP	1 10	res. der, David J. Chalet Circle enton, F1.34202	<b>∡</b> Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP		· ·	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deicte	TITLE  NAME  STREET ADDRES  CITY-ST-ZIP	s		Change	Addition

FILED

13. I hereby certify that the information supplied will this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 ecopyer or duster supplemental reports as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an artises, with all other like empowered.

SIGNATURE JOSEPH HUNSader, President 1/24/00 941-322-1195
SIGNATURE SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR