

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90048 028 ***150.00

DOCUMENT # L83158

1. Entity Name
HUNSADER FARMS, INC.

Principal Place of Business

HUNSADER FARMS INC
208 25TH STREET W
BRADENTON FL 34202
US

Mailing Address

HUNSADER FARMS INC
208 25TH STREET W
BRADENTON FL 34202
US

2. Principal Place of Business

Hunsader Farms Inc.
 Suite, Apt. #, etc.
6320 205TH ST. E.

City & State
Bradenton, FL.

Zip *34211* **Country** *Manatee*

3. Mailing Address

Hunsader Farms Inc.
 Suite, Apt. #, etc.
6320 205TH ST. E.

City & State
Bradenton FL.

Zip *34211* **Country** *Manatee*



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0202191

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MCGUIRE AND PARRY
1001 - 3RD AVENUE WEST
SUITE 600
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name *Michael T. Hunsader*

Street Address (P.O. Box Number is Not Acceptable)
6320 205TH ST. E.

City *Bradenton* **FL** **Zip Code** *34211*

8. 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 *Michael T. Hunsader*

Signature, typed or printed name of registered agent and title if applicable.

[Signature]

(NOTE: Registered Agent Signature Required when reinstating)

1/17/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **(See criteria on back)**

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **Trust Fund Contribution.**

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE *D* ☒ **Delete**
NAME *HUNSADER, JOSEPH H.*
STREET ADDRESS *208 25TH ST. W*
CITY-ST-ZIP *BRADENTON FL 34205*

TITLE *D* ☐ **Delete**
NAME *HUNSADER, MICHAEL T.*
STREET ADDRESS *6320 205TH ST. E.*
CITY-ST-ZIP *BRADENTON FL 34202*

TITLE *D* ☐ **Delete**
NAME *HUNSADER, DAVID J.*
STREET ADDRESS *9904 CHALET CIR.*
CITY-ST-ZIP *BRADENTON FL 34202*

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ **Change** ☐ **Addition**

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**

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TITLE ☐ **Change** ☐ **Addition**

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**

NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-322-1195

CR2E034 (9/01)