

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 MAR -4 PM 1:04

DOCUMENT # M09228

1. Corporation Name
STEWART FARMS MANAGEMENT CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
8344 W BOYNTON BCH BLVD
BOYNTON BCH FL 33425

Mailing Address
PO BOX 740012
BOYNTON BCH FL 33474

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 c/o SunTrust Bank, South Fla., NA

22 City & State

27 P.O. Box 1150

City & State

24 Zip Country

28 Delray Beach, FL

29 33447

30 Country

3. Date Incorporated or Qualified

12/20/1984

4. FEI Number

59-2478270

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEWART, D.E.
1928 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405

10. Name and Address of New Registered Agent

81 Name
D. Scott Elliott

82 Street Address (P.O. Box Number is Not Acceptable)
c/o Steel Hector & Davis LLP

83 777 South Flagler Drive, Suite 1900W

84 City
West Palm Beach

85 Zip Code
FL 33401-6198

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 is 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 607.0502, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

March 2, 1999

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
STEWART, DOUGLAS E.
1928 S. DIXIE HWY
W. PALM BEACH FL 33405

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
STEWART, EARL D., JR.
1928 S. DIXIE HWY
W. PALM BEACH FL 33405

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
PD
STEWART, DOUGLAS MCGREGOR
3785 Yosemite Drive
Okemos, MI 48864

☒ Change ☒ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
V
CAIN, NAOMI
8344 W. Boynton Beach Boulevard
Boynton Beach, FL 33425

☒ Change ☒ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
SD
LUING, GARY A.
2612 Lakefront Drive
Lake Wales, FL 33853

☒ Change ☒ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
TD
PIEGEL, ROBERT J.
c/o SunTrust Bank, 302 E. Atlantic Avenue
Delray Beach, FL 33483

☒ Change ☒ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
D
FARRELL, JOHN M.
130 Bloomfield Drive
West Palm Beach, FL 33405

☐ Change ☒ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

Robert J. Piegel, Treasurer and Director

3-3-99

Date

561-243-6737

Daytime Phone #

CR2E034 (11/98)