**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Feb 25, 1999 8:00 am Secretary of State 02-25-1999 90001 038 \*\*\*150.00

## **DOCUMENT # M76698**

SOUTHE	rn farm Supply, Inc.								
Principal Place	of Business	Mailing Address				1 1997 2017 11 10 10 10 10 10 10 10 10 10 10 10 10		_	
ONE ILS HAVY	ant NORTH	906 U.S. HWY. 301 NORTH							
P.O. BOX 398 P.O. BOX 3		P.O. BOX 398				TT 164 71 (16	CDACE		
PALMETTO FL 34221		PALMETTO FL 34221			DO NOT WRITE IN THIS SPACE				
US		US			3. Date incorporated or Qualified				
ĺ						04/15/1988		· · · · · · ·	
2. Principal Pl	lace of Business	2a, Mailing Address				4. FEI Number			plied For
21		26				65-0068995			Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Re	
22		27						\$5:00·	Adams State - 1 - 1
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Zip	Country	Zip	_	.u <b>y</b>		This corporation owes the curl     Personal Property Tax.	en year in		□No
24	25		30			10. Name and Address of New I	Registered		
	9. Name and Address of Current	t Registered Agent		81 Na:	200	14. Haire and Mudiass of Hear	B	· -8	
	**************************************		j	110	110				
	rison, thomas W. 1-6th ave. W.			82 Stree		ess (P.O. Box Number is Not Accept	able)		
	FLOOR		ŀ	83					
BRA	DENTON FL 34205			04 6				85 Zip C	Code
	to the provisions of Sections 607.0502		į	84 Cit			FŁ	<b>.</b> ]	
	m familiar with, and accept the obligat								
SIGNATURE						oration submits this statement for the in's board of directors. I hereby access ( when remaining)	DATE		
I	Signature, typed or printed name of registered agent	I and title if applicable. (NOTE					DATE	ND DIRECTO	
SIGNATURE	Signature, typed or printed name of registered agent	I and title if applicable. (NOTE	: Registered .	Agent signe		I when reinstating)	DATE		
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I nereby certify that the information supplied with this filling does not qualified indicated on this annual report of supplemental annual report is true and officer or director of the corporation at the receiver or trustee empoyered Block 12 or Block 13 if changes, by an an attachment without address, with

SIGNATURE: