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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M97569

(1)

FILED Apr 18 1997 8:00am Secretary of State

ASSOCIATED TREE FARMS, INC.											
	. 1										
Principal Plac	ce of Business	Mi	ailing Address						BIBN BIBN GIBN	Billio HODA	
105 TREE FARM RD 105 TREE FARM RD SEBRING FL 33872 SEBRING FL 33872-6356						į					
							3. Date Incorporated or Qualified 09/15/1988		ate of Last F /29/1996	Report	
	Place of Business	h1	Mailing Address				4. FEI Number		11	pplied For	
Suite, Apt	# plc	26	Suite, Apt. #, etc.				59-2931916			ot Applicable Additional	
22		27	country, square my occo.				5. Certificate of Status Desired			equired	
City & Sta	le		City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28	C1 -4				Trust Fund Contribution			to Fees	
Zip	Country	ļ,	Zip	Countr	у		8. This corporation has liability for			199.032,	
24	25 9. Name and Address of Curre	29	torod Agent]30		<u></u>	Florida Statutes 10. Name and Address of New Re		□ No		
DEA	INETT, ROBERT B.	ii negis	resen whelir	81	Name		TU. Maille Blita Address of Mew A	gistered	Agent		
	N. WASHINGTON BLVD.				1				~·····································		
	TE 29			82	Strect	Addres	ss (P.O. Box Number is Not Accepta	ole)			
	RASOTA FL 34238			83							
J				84					705170		
				64	City			FL	85 Zip	Code	
office or	to the provisions of Sections 607.056 registered agent, or both, in the State am familiar with, and accept the oblig	e of Floric ations of	da. Such change was , Section 607.0505, F	authorized b lorida Statute	y the cor s.	poratio	in's board of directors. I hereby acce	pt the ap	pointment as	registered	
12.	Signature, typed or pointed name of registered age OFFICERS AN			Tt Hegistered Ag	ent signature	required	twhen reinstating) ADDITIONS/CHANGES 10 OFFI	DATE CERS AN	O DIBECTOR	3S IN 12	
TITLE	P		DELETE	1.1 1111.6	.741	VF			Change	Addition	
NAME	MCDANIEL, B. WAYNE SR			1.2 NAME		MAZ	Daniel, B. Wayne	sn.	·		
STREET ADDRESS	11515 PAYNE RD			1.3 STREE	1 ADDRESS	100	Daniel Di sia fis	•			
CITY-ST-ZIP	SEBRING FL			1.4 C/IY-	\$1 - <i>2</i> (r						
TITLE	VP		☐ DELETE	2.1 1/11 f		P	Daniel, Bobby W 33 Fisher Stree	,	Change	☐ Addition	
NAME	MCDANIEL, BOBBY W. JR.			2.2 NAMÉ		Me	Daniel, Bobby W	JR	•		
STREET ADDRESS	FISHER STREET 623			2.3 STREE	ADDRESS	10	93 Fisher STree	7			
CITY-ST-ZIP	LK PLACID FL			2 4 CITY-	ST - 71P	0	770.100				
TITLE	ST Cannon, Diane		DELETE	3 1 1HLf					Change	Addilion	
NAME DIRECT ADDRESS	2004 S OALHOUN AVE 2	101.	Sils Rel Waler Al.	3.2 NAME	t Albhibene						
STREET ADDRESS	AVON PARK EL	ove.	Do los KI		I ADDRESS						
CITY-ST-ZIP TITLE	N. St. 1188-1-2		DELFTE	3.4 CITY- 4.1 TITLE	31 · ZII'				Change	Addition	
NAME				4 2 NAME							
STREET ADDRESS	}			1	1 ADDRESS]					
CITY-ST-ZIP				4.4 CITY+	\$1-7IP	1					
TITLE			DELETE	5.1 1BLF		[Change	Addition	
NAME				5.2 NAME							
STREET ADDRESS				53 STREE	I ADDRESS						
CITY-ST-ZIP				5.4 CITY -	51 - ZIP				_ .		
TITLE			☐ DECETE	6 1 7111.6		[L Change	Addition	
NAME				6.2 NAME							
STREET ADDRESS	1			1	ADDRESS						
CITY-ST-ZIP	i			6.4 C/1Y - 1	ST - ZIF	1					

14. I do 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.

CIGNATURE:

Sand Warman

1-14-97 9A1-ALSASA