

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011950

FILED  
Feb 11, 2012  
Secretary of State

**Entity Name:** THE WAY FAMILY FARMS, INC.

**Current Principal Place of Business:**

4200 CANONGATE COURT  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 517  
BROOKSVILLE, FL 34605

**New Mailing Address:**

**FEI Number:** 27-1497528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAURA, DOUGLAS SR.  
4200 CANONGATE COURT  
SPRING HILL, FL 34609 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MAURA, DOUGLAS SR.  
**Address:** 4200 CANONGATE COURT  
**City-St-Zip:** SPRING HILL, FL 34609

**Title:** VP  
**Name:** MOBLEY, MICHAEL  
**Address:** 4701 KEYSVILLE AVENUE  
**City-St-Zip:** SPRING HILL, FL 34608

**Title:** S  
**Name:** MAURA, MARY E  
**Address:** 4200 CANONGATE COURT  
**City-St-Zip:** SPRING HILL, FL 34609

**Title:** T  
**Name:** LEONARD, MELINDA  
**Address:** 5437 COLCHESTER AVENUE  
**City-St-Zip:** SPRING HILL, FL 34608

**Title:** D  
**Name:** MAURA, FREDERICK  
**Address:** 5 MAE VIEW CIRCLE  
**City-St-Zip:** BROOKSVILLE, FL 34601

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DOUGLAS MAURA, SR.

P

02/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date