

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N27438

1. Entity Name

CRYSTAL HILLS MINI FARMS UNIT 1 & 2 ASSOC., INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90033 023 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 1514
 HERNANDO FL 34442
 US

P O BOX 1514
 HERNANDO FL 34442-1514
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHYER, STANLEY
 26 E BENJAMIN ST
 HERNANDO FL 34442

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME PD
 STREET ADDRESS SHYER, STANLEY
 CITY-ST-ZIP 26 E BENJAMIN ST
 HERNANDO FL 34442

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME VPD
 STREET ADDRESS HELLER, ARTHUR
 CITY-ST-ZIP 595 E JINNITA ST
 HERNANDO FL 34442

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME D
 STREET ADDRESS JOYCE FERRARA
 CITY-ST-ZIP 225 E. SHAWNA CT.
 HERNANDO FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME D
 STREET ADDRESS LOPEZ, RUDOLFH
 CITY-ST-ZIP 595 E. JINNITA ST.
 HERNANDO FL

TITLE ☐ Change ☒ Addition
 NAME **JULIE METZ**
 STREET ADDRESS **224 E. NICHOLAS ST**
 CITY-ST-ZIP **HERNANDO, FL. 34442**

TITLE ☒ Delete
 NAME D
 STREET ADDRESS ANDERSON, DANIEL
 CITY-ST-ZIP 560 E. PILATL ST.
 HERNANDO FL

TITLE ☐ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **ERIC BANKS**
 CITY-ST-ZIP **442 E. BENJAMIN ST**
HERNANDO, FL 34442

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STANLEY SHYER, PRESIDENT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-00

Date

352-527-4146

Daytime Phone #

CR2E037 (9/99)