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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N38748

1. Corporation Name

ALACHUA COUNTY FARMERS MARKET, INC.

Principal Place of Busine
5900 NW 13TH ST.
GAINESVILLE FL 32606
110

FILED Feb 23, 1999 8:00 am secretary of State

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	e of Business	Mailing Address							
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GAINESVILLE FL 32606 GAINSVILLE FL 32606									
US	U\$				8891181 600 17161 19171 50011 618	Pi idil didi: 8:8:	L BERTE REAL REDIC	BLAN 1881	
2 Deinsingt Di	Inne of Business	2a. Mailing Address			3. Date	Incorporated or Qualifed			
Z. Principal Pi	lace of Business	├ ┐			06/2	2/1990		•	
21		26			4. FEI N				lied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			50-2	065075			
22		27			33 0				Applicable
City & State	е	City & State			5. Certif	cate of Status Desired		\$8.75 Ad	I
23		28			J. Cara	0010 01 010100 000100		Fee Red	uired
Zip	Country	Zip	Coun	itry	6. Elect	ion Campaign Financing		\$5.00 N	/lay Be
24	25	29	30		Trust	Fund Contribution		Added to	Fees
24	9. Name and Address of Currer		1001			e and Address of New	Registered A	Agent	
	J. Maille and Address of Curren	it itegrateree Agent		81 Nan					
				_				•	
Brown W	VILLIAM L			82 Stre	et Address (P.O. Bo	ox Number is Not Accept	table)		1
2800 NE 3	39TH AVE		L						
	LLE FL 32609			83					ļ.
CHITCOTT	LLL / L GEGGG		L					11 6	
			-	84 City			FL	85 Zip C	ode
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11. Pursuant	to the provisions of Sections 617.050 egistered agent, or both, in the State)2 and 617.1508, Florida Statut	es, the ab	ove-nam	d corporation sub-	nits this statement for the f directors. I hereby acce	ot the appoir	changing its r ntment as red	istered
agent. La	m familiar with, and accept the obliga	ations of, Section 617.0503, Flo	rida Statu	tes.	poralion o bound o			J	
-									Į
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE	: Registered /	Agent signati	e required when reinstatin	g)	DATE		·
12.		ND DIRECTORS	13.		ADDIT	IONS/CHANGES TO OF	FICERS AN	D DIRECTOR	S IN 12
TITLE	TD	☐ DELETE	1.1 1111	LE	D			☐ Change	Addition
	SHORT, DENNIS		1.2 NA	45	SEAB	NW 171	ERRY		,
NAME				VIC.		1111 191		•	
STREET ADDRESS					1442	N40 ///	/ 4 4	K.	
STREET ADDRESS	1113 N E 23 AVE			REET ADDRE	s 992 4	F/	296	15	ľ
CITY-ST-ZIP	GAINESVILLE FL 32609			REET ADDRE Y-ST-ZIP	Alach	ua F1.	3261	/ S	
	l .	☐ DELETE		Y-ST-ZIP	Alach	ua F1.	3261	/ S	Addition
CITY-ST-ZIP	GAINESVILLE FL 32609 CD	☐ DELETE	1.4 CFT	Y-ST-ZIP LE	Alach	ua F1.	3261	/ S	Addition
CITY-ST-ZIP TITLE NAME	GAINESVILLE FL 32609 CD RILLANO, VIDO	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAI	Y-ST-ZIP LE ME	D Loui	tuer, To	3261	/ S	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	GAINESVILLE FL 32609 CD RILLANO, VIDO 2828 WEST SR 235	☐ DELETE	1.4 CFT 2.1 TITI 2.2 NAI 2.3 STF	Y-ST-ZIP LE ME REET ADDRE	Alach D Cours	tuer, To	3261	/ S	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAINESVILLE FL 32609 CD RILLANO, VIDO 2828 WEST SR 235 BROOKER FL		1.4 CFT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CFI	Y-ST-ZIP LE ME REET ADDRE	Alach D Cour 5805 Alach	ther, To NW 158	m Stree	Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	GAINESVILLE FL 32609 CD RILLANO, VIDO 2828 WEST SR 235 BROOKER FL SD	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI	Y-ST-ZIP LE ME REET ADDRE IY-ST-ZIP LE	Alach D Cour 5805 Alach	ther, To NW 158	m Stree	Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	GAINESVILLE FL 32609 CD RILLANO, VIDO 2828 WEST SR 235 BROOKER FL SD HOLDER, MARION		1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI	Y-ST-ZIP LE ME REET ADDRE IY-ST-ZIP LE	Alach D Cour 5805 Alach C D B A R	ther, To NW 158 TZ, JF	RRY	Change	
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	GAINESVILLE FL 32609 CD RILLANO, VIDO 2828 WEST SR 235 BROOKER FL SD HOLDER, MARION 3900 SW 23RD ST GAINESVILLE FL D VOGS, PAT 15905 SW 70TH ST ALACHEE FL 32615 VED HOLT, JIM 821 SW 202 ST	□ DELETE	14 CIT 2:1 TITI 22 NAV 2:3 STF 2:4 CIT 3:1 TITI 3:2 NAV 3:3 STF 3:4 CIT 4:1 TITI 4:2 NAV 4:3 STF 4:4 CIT 5:2 NAV 5:3 STF 5:3 NAV 5:3 STF	Y-ST-ZIP LE ME REET ADDRE IY-ST-ZIP LE ME REET ADDRE IY-ST-ZIP LE ME REET ADDRE IY-ST-ZIP LE ME REET ADDRE INME REET ADDRE INME REET ADDRE INME REET ADDRE INME	Alach D Cour 5805 Alach C D R 9603 GAINE VOSS SKAS	HART, TO NW 158 TZ, JE S.W. 19 SUILE F/ PAT W. State	RRY 330	Change Change Change	Addition Addition
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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 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attainment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

GAINESVILLE FL

1-13-99

Brooker

362-376-8026