FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURI



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500000970 (2)

FARMTON RESOURCES, INC.

Principal Place of Business Mailing Address					i shinin die thies Ach Abis ann ann ann ann ann ann ann ann ann an	
1625 MAYTOWN OSTEEN FL 327		1625 MAYTOWN RD OSTEEN FL 32764-9632				
						3. Date Incorporated or Qualified 02/28/1995 3a. Date of Last Report 04/02/1996
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For 59-3360478 Applied For Not Applied by
21		26				Trot Applicable
Suite, Apt. #	#, etc	Suite, Apt. #, etc.	–			5. Certificate of Status Desired S8.75 Additional
City & State		City & State	City & State			Fee Required
23			28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	•		Florida Statutes Yes X No
<u> </u>	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
STORCH	, HANSEN & MORRIS, P.A.		82 Street A		Street A	Address (P.O. Box Number is Not Acceptable)
	CLYDE MORRIS BLVD					,
SUITE 30				83		
DAYTON	A BEACH FL 32119			В4	City	85 Zip Code
						FL ``\
11. Pursuant to	to the provisions of Sections 617.050 educatered agent, or both, in the State	2 and 617.1508, Florida Statute of Florida. Such change was a	es, the al outhorize	oove d by	-named the cord	d corporation submits this statement for the purpose of changing its registered regration's board of directors. I hereby accept the appointment as registered
agent. I ar	m familiar with, and accept the obliga	ations of, Section 617.0503, Fig	rida Stat	utes		rporation's board of directors. I hereby accept the appointment as registered
SIGNATURE _						
12.	Signature, typied or printed name of registered age OFFICERS ANI		13.	1 Ager	nt eignature	e required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP OF TOUR TOUR	DELETE		1.1 TITLE		Change Addition
NAME	SCHROEDER, CHARLES E		1.2 NAME			
STREET ADDRESS	1625 MAYTOWN RD		1.3 STREE		ADDRESS	
CITY-ST-ZIP	OSTEEN FL 32764		1.4 CITY - 1		- 21 P	
THTLE	DV	₩ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	SVENSSON, LENNANT S		2.2 NAME			ر د . بر
STREET ADDRESS	1625 MAYTOWN RD		2.3 STREET		address	
CITY-ST-ZIP	OSTEEN FL 32764		2.4 CITY-5		T-ZIP	
TITLE	DST	☐ DELETE	3.1 TI	3.1 TITLE		DV Change Addition
NAME	FRIEDRICHS, MICHAEL R		3.2 NAME			Friedrichs, Michael R.
STREET ADDRESS	1625 MAYTOWN RD		3.3 \$1	REET	address	1625 Maytown Road
CITY - ST - ZIP	OSTEEN FL 32764	T process		ITY-S	T-ZIP	Osteen, FL 32764
TITLE		☐ DELETE	4.1 Ti			DST Change X Addition
NAME			4 2 N		4DD0000	Goering, Barbra
STREET ADDRESS					ADDRESS	1625 Maytown Road
CITY-ST-ZIP TITLE		☐ DELETE	51 TI	TY-SI	1-ZIP	Osteen, FL 32764 Change Addition
NAME			5.2 N/			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				TY-\$1		
TITLE		DELETÉ	6.1 TITLE			Change Addition
NAME			6.2 N	AME		
STREET ADDRESS			6.3 S	TRÉET.	ADDRESS	
CITY-ST-ZIP				ITY-SI		
						stated in Section 119.07(3)(i), Florida Statutes. I further certify that the d that my signature shall have the same legal effect as if made under oath; that
Lam 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 attachment with an address.						

Daytime Phone # 0014449

January 8, 1997 312/644-6720

FILED

Jan 27 1997 8:00am

Secretary of State