FILE NOW: FILING FEE IS \$61.25



FILED Apr 25 1997 8:00am Secretary of State



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Secretary of State 1997 DOCUMENT # N9600000609 (5) MONDO COUNTY SHERIFF'S ANMAL FARM, INC. Principal Pace of Dusiness Making Address Soft Coulder in NET WEST FL 3000-4007 Applied For Net West FL 3000-4007 Principal Pace of Dusiness Subs. Apt. 4, 810 22. Making Address Subs. Apt. 4, 810 23. Making Address Subs. Apt. 4, 810 24. Filter Pace of Dusiness Subs. Apt. 4, 810 25. Coulder in Subs. Apt. 4, 810 26. Cly & Sites 27. Principal Pace of Dusiness Subs. Apt. 4, 810 28. Subs. Apt. 4, 810 29. Subs. Apt. 4, 810 20. Cly & Sites 20. Cly & Sites 20. Cly & Sites 20. Dusiness Subs. Apt. 4, 810 20. Dusiness Subs. Applied For Note Subs. Applied For Note Address Subs. Applied For Not				FLORIDA DEPAR	ITMENT OF STATE	\Box Apr 25 1	997 8:00ar
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MONROE COUNTY SHERIFF'S ANIMAL FARM, INC. Principal Piace of Business Mainry Address Net West F1, 33040 3. Data incorporated or Countried O2/05/1986 2. Applied For O2/05/1986 2. Applied For O2/05/1986 3. Data incorporated or Countried O2/05/1986 2. Filt Number O2/05/1986 2. Control Sales Desired Sulfa, Act 4, etc. 2. Sulf	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			•	Secreta	Secretary of State	
Principal Place of Business	DOCU 1. Corporatio	MENT # N96	00000	0609 (5)			
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2. Date Incorporated or Qualified 2. Date Incorporated or Qualified 2. Principal Place of Business 2. A. FER Number 2. Suite Apt. 4. etc. 2. Suite Apt. 6. etc. 2. Suite Apt. 6. etc. 2. Suite Apt. 6. etc. 2. Cly & State 2. Country 2. Country 2. Electron Campaign Financing 3. Food May Be 3. This corporation has liability for interplibit for winders. 199 GOZ 3. Food Address of New Registered Agent 3. Name and Address of Current Registered Agent 3. Name and Address of New Registered Agent 3. Name and Address of New Registered Agent 3. Name and Address of New Registered Agent 4. FER Name 4. FER Name 5. Country 8. Name and Address of New Registered Agent 4. Name and Address of New Registered Agent 5. Name and Address of New Registered Agent 5. Name and Address of				-			
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Sulfe, Apt. 4, etc.						02/05/1996	3a. Date of Last Report
Suite, Apt. #, etc. Suite, Apt. #, etc.		lace of Business	\vdash	. Mailing Address			Applied For Not Applicable
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Se Se Se Se Se Se Se Se	Zip	Country		Z ip	Country		
Name PAUL S. MILLUS	24		29 Current Registe	red Agent	30	Florida Statutes	Yes No
SIGNATURE 1. Pursuant to the provisions of Sections 617 D502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am fartility with, and agong the obligations of, Section 617.0503, Florida Statutes, the above-named corporations submits this statement for the purpose of changing its register of agent. I am fartility with, and agong the obligations of, Section 617.0503, Florida Statutes SIGNATURE 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporations submits this statement for the purpose of changing its register of sections of the purpose of changing its register of the pur					81 Name	PAUL 5. MILLS	Rigidian Vilgini
Signature Provisions of Sections 617,0502 and 617,1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its register agent. I am farplitary lim. In displayed purpose of changing its register agent. I am farplitary lim. In displayed purpose of changing its register agent. I am farplitary lim. In displayed purpose of possess of the appointment as registered agent. I am farplitary lim. In displayed purpose of posses of purpose of possess of purpose of possess of purpose of posses of purpose of purpose of posses of purpose of purpos					82 Street Ad	dress (P.O. Box Number is Not Acceptab	ile)
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent. Lam Aprillar with mid accept the obligations, of Section 617 0503, Florida Statutes Signature Signature synect philed name of registered agent and life in protate. (NOTE Registered Agent Statutes) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D						DUUGL ST. SUITE	. н
11. Presuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of office or register of agent. I am partial with, and accept the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register of agent. I am partial with, and accept the obligations of, Section 617.0503, Florida Statutes SIGNATURE Signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TULE D OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OFFICERS AND DIRECTORS IN 12 TITLE D OELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OELETE 13. TITLE Change Addit Addit Crisinge Addit Ad	**				84 City	. 13	■■ 85 Z ip_Code
SIGNATURE	. 11. Pyrsuant	to the provisions of Sections 6	17.0502 and 617	.1508, Florida Statute	s, the above-named co	Y WEST progration submits this statement for the p	TL 33040
Signature typed Ordined name of repostered agont and title if applicable (NOTE: Registered Agont signature required when reinstating) DATE	office or r agent. I a	egistared agent, or both, in the m arrillar with, and accept the	State of Florida obligations of, t			ation's board of directors. I hereby accep	of the appointment as registered
12	SIGNATURE	Signature, typed or plinted name of regist	lered agont and tale if			uired when reinstating)	//7/97
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14. 160 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		, voice, was the entitlemental St	SILI FIIIY DOUGLAS	milia does not bilally	ror increxenionon state	sum aeciron i 19.07(3110) Elorida Statutes	. Luurner ceflity that the

14. 1 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.