

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED
Feb 12, 2003 8:00 am
Secretary of State

01-21-2003 90053 032 ***150.00

DOCUMENT # P00000027867

1. Entity Name
IRON CROSS FARMS, INC.



Principal Place of Business
**1467 MAYTOWN ROAD
OAK HILL FL 32759**

Mailing Address
**1467 MAYTOWN ROAD
OAK HILL FL 32759**

J0000101



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3634434**

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

**HAUN, ROBERT S
1467 MAYTOWN ROAD
OAK HILL FL 32759**

~~HAUN, ROBERT S~~

Name

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

**303 WOOD ST
LAKE MARY FLORIDA**

City

32746

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Robert S Haun*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D**
NAME **HAUN, ROBERT**
STREET ADDRESS **1467 MAYTOWN ROAD**
CITY-ST-ZIP **OAK HILL FL 32759**

☐ Delete

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☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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: *ROBERT S HAUN*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT S. HAUN

1/13/03

Date

4072279620

Daytime Phone

CR2034 (10/02)