

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000088212**1. Entity Name
ST. LUCIE FARMS, INC.**Principal Place of Business**200 EAST BROWARD BOULEVARD
15TH FLOOR
FORT LAUDERDALE FL
33301**Mailing Address**200 EAST BROWARD BOULEVARD
15TH FLOOR
FORT LAUDERDALE FL
333012. Principal Place of Business
1850 FOUNTAINVIEW BLVD.3. Mailing Address
1850 FOUNTAINVIEW BLVD.Suite, Apt. #, etc.
SUITE 201Suite, Apt. #, etc.
SUITE 201City & State
PORT ST. LUCIE FLCity & State
PORT ST. LUCIE FLZip
34986

Country

Zip
34986

Country

4. FEI Number
65-0830948

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentSOMERSTEIN BARRY E
200 EAST BROWARD BOULEVARD
15TH FLOOR
FORT LAUDERDALE FL
33301**7. Name and Address of New Registered Agent**

Name

HEGENER PAUL J

Street Address (P.O. Box Number is Not Acceptable)
1850 FOUNTAINVIEW BLVD.

SUITE 201

City
PORT ST. LUCIE

FL

Zip Code
34986

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 **PAUL J. HEGENER****04/26/2001**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZBORIL JAMES L	
STREET ADDRESS	1850 FOUNTAINVIEW BLVD, SUITE 201	
CITY-ST-ZIP	PORT ST. LUCIE FL 34986	
TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAGE DAVID C	
STREET ADDRESS	1850 FOUNTAINVIEW BLVD, SUITE 201	
CITY-ST-ZIP	PORT ST. LUCIE FL 34986	
TITLE	DVT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSON JAMES H	
STREET ADDRESS	1850 FOUNTAINVIEW BLVD, SUITE 201	
CITY-ST-ZIP	PORT ST. LUCIE FL 34986	
TITLE	DVS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GILBERT GLEN R	
STREET ADDRESS	1750 E SUNRISE BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	
TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEGENER PAUL J	
STREET ADDRESS	1850 FOUNTAINVIEW BLVD, SUITE 201	
CITY-ST-ZIP	PORT ST. LUCIE FL 34986	
TITLE	DC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ABDO JOHN E	
STREET ADDRESS	1350 NE 56TH ST	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul-J. Hegener

P

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)