

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000060777

1. Entity Name
WESTWAY FARMS, INC.



Principal Place of Business

**1601 NW 102ND BLVD.
WILDWOOD, FL 34785**

Mailing Address

**1601 NW 102ND BLVD.
WILDWOOD, FL 34785**

DO NOT WRITE IN THIS SPACE



01232004 No Chg-P CR2E034 (10/03)

4. FEI Number
30-0105160

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MARCHBANKS, LAWRENCE J
110 CLEVELAND AVENUE
WILDWOOD, FL 34785**

**DO NOT WRITE
IN THIS SPACE**

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

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000032806
02/05/04-80018-008 150.00**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **HAIRE, GLORIA M**
STREET ADDRESS **1601 NW 102ND BLVD.**
CITY-ST-ZIP **WILDWOOD, FL 34785**

TITLE
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CITY-ST-ZIP

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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:

Gloria M. Haire **GLORIA M. HAIRE**

2-2-04

Date

Daytime Phone #

**352
748-5924**