


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90084 012 ***150.00

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
---	---



2. Principal Place of Business 1601 NW 102ND BLVD	3. Mailing Address S/A
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/05)

City & State Wildwood Florida	City & State
Zip 34785	Country SUMTER

4. FEI Number 30-0105160	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent MARCHBANKS, LAWRENCE J 110 CLEVELAND AVENUE WILDWOOD FL 34785	
---	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAIRE, GLORIA M 1601 NW 102ND BLVD. WILDWOOD FL 34785 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. CAIRANO, GLORIA M 1601 NW 102ND BLVD Wildwood FL 34785 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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. D. Cairano Gloria M. D. CAIRANO 2-16-06 748-5924
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40020065

#P02000060777

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT,
IN AND FOR SUMTER COUNTY, FLORIDA

Case No.: 2005 DR 000176
Division: 2005-DR-176

SUMTER COUNTY, FLORIDA
GLORIA HAYWARD, CLERK OF CIRCUIT COURT

IN RE: THE NAME CHANGE OF

GLORIA DICAIRANO HAIRE, Petitioner.

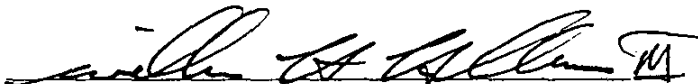
FINAL JUDGMENT OF CHANGE OF NAME (ADULT)

This cause came before the Court on February 23, 2005 hearing on Petition for Change of Name (Adult) under Section 68.07, Florida Statute, and appearing to the Court that:

1. Petitioner is a bona fide resident of SUMTER County, Florida;
2. Petitioner's request is not for any ulterior or illegal purpose; and
3. Granting this petition will not in any manner invade the property rights of others, Whether partnership, patent, good will, privacy, trademark, or otherwise; it is

ORDERED that Petitioner's present name, GLORIA DICAIRANO HAIRE, is changed to GLORIA DiCAIRANO, by which Petitioner shall hereafter be known.

ORDERED ON February 23, 2005


CIRCUIT JUDGE

COPIES TO:
Gloria DiCairano
1601 NW 102ND Blvd.
Wildwood, FL 34785
02/23/05

GLORIA R. HAYWARD
CLERK OF THE CIRCUIT COURT

by Grace Krause, D.C.



STATE OF FLORIDA, COUNTY OF SUMTER
I HEREBY CERTIFY, that the above and
foregoing is a true copy of the original
GLORIA R. HAYWARD, Clerk of Circuit Court
By Grace Krause
Dated 02-23-2005

02/23/2005 #2005-6549
02:18:10PM B-1335 P-189
CS