

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154432

Entity Name: FARMER & SON, INC.

FILED  
Mar 30, 2005  
Secretary of State

## Current Principal Place of Business:

1062 S.E. PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34952

## New Principal Place of Business:

## Current Mailing Address:

731 SYBILWOOD CIR  
WINTER SPRINGS, FL 32708

## New Mailing Address:

FEI Number: 36-4545954

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALKER, BERRY J JR ESQ  
WALKER & TUDHOPE, P.A.  
1053 MAITLAND CENTER COMMONS BLVD 2 FLOOR  
MAITLAND, FL 32751 US

## Name and Address of New Registered Agent:

FARMER, MEADE  
731 SYBILWOOD CIRCLE  
WINTER SPRINGS, FL 32708 US

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: MEADE FARMER

03/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/T ( ) Delete  
Name: FARMER, MEADE P/T  
Address: 731 SYBILWOOD CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: V/S ( ) Delete  
Name: FARMER, JUSTIN M V/S  
Address: 2502 S.E. TIFFANY ST.  
City-St-Zip: PT. ST. LUCIE, FL 34952

Title: D ( ) Delete  
Name: FARMER, JANE M D  
Address: 731 SYBILWOOD CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MEADE FARMER

P/O

03/30/2005

Electronic Signature of Signing Officer or Director

Date