

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000041611

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** HUMPHREYS FARM, INC.

**Current Principal Place of Business:**

2701 SOUTH BAYSHORE DRIVE  
401  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

7 BLUE SKY LANE  
MONTVALE, NJ 07645

**New Mailing Address:**

**FEI Number:** 16-1719981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** MS  
**Name:** FRIEDMAN, LISA B MS  
**Address:** 2701 SOUTH BAYSHORE DRIVE #401  
**City-St-Zip:** COCONUT GROVE, FL 33133

**Title:** MS  
**Name:** LISA, FRIEDMAN B LISA FR  
**Address:** 7 BLUE SKY LANE  
**City-St-Zip:** MONTVALE, NJ 07645

**Title:** MS  
**Name:** FRIEDMAN, LISA B MS  
**Address:** 7 BLUE SKY LANE  
**City-St-Zip:** MONTVALE, NJ 07645

**Title:** MS  
**Name:** FRIEDMAN, LISA B MS  
**Address:** 7 BLUE SKY LANE  
**City-St-Zip:** MONTVALE, NJ 07645

**Title:** MS  
**Name:** FRIEDMAN, LISA B MS  
**Address:** 7 BLUE SKY LANE  
**City-St-Zip:** MONTVALE, NJ 07645

**Title:** MS  
**Name:** FRIEDMAN, LISA B MS  
**Address:** 7 BLUE SKY LANE  
**City-St-Zip:** MONTVALE, NJ 07645

I hereby 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 all other like empowered.

**SIGNATURE:** LISA FRIEDMAN

DIR

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date