

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164306

Entity Name: V V FARMS, INC.

FILED
May 18, 2009
Secretary of State

Current Principal Place of Business:

11356 HARLAN DRIVE
JACKSONVILLE, FL 32218

New Principal Place of Business:

45500 STRATTON RD
CALLAHAN, FL 32011

Current Mailing Address:

11356 HARLAN DRIVE
JACKSONVILLE, FL 32218

New Mailing Address:

P.O. BOX 1459
CALLAHAN, FL 32011

FEI Number: 20-3969538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRURY, MARK A
11356 HARLAN DRIVE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

DRURY, MARK A
45500 STRATTON RD
CALLAHAN, FL 32011 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:

05/18/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DRURY, MARK A
Address: 11356 HARLAN DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD () Delete
Name: GAINES, DALE W
Address: 1843 OCEAN DR
City-St-Zip: JAX BEACH, FL 32250

Title: VD () Delete
Name: TOVEV, KIRK A
Address: 13751 CLUB COVE DR
City-St-Zip: JAX, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DRURY, MARK A
Address: 45500 STRATTON RD
City-St-Zip: CALLAHAN, FL 32011

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 exemption stated in Chapter 119, 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: MARK A DRURY

PD

05/18/2009

Electronic Signature of Signing Officer or Director

Date