2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139569

WARDELL, SHANNON R

POST OFFICE BOX 2079

PALMETTO, FL 34220

Name:

Address:

City-St-Zip:

FILED Jun 17, 2009 Secretary of State

Entity Na	me: WARDEI	L'S CENTERLINE FARM INC			
Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
11355 ERIE ROAD PARRISH, FL 34219				6110 213TH STREET E BRADENTON, FL 34211	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	FICE BOX 207 O, FL 34220	9			
FEI Number	: 20-8200151	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
WARDELL, WILLIAM G 11355 ERIE ROAD PARRISH, FL 34219 US			6110 213TĤ STRI	WARDELL, WILLIAM G 6110 213TH STREET E BRADENTON, FL 34211 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE:				06/17/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (WARDELL, DI/ POST OFFICE PALMETTO, FI	BOX 2079	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (WARDELL, WI POST OFFICE PALMETTO, FI	BOX 2079	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (WARDELL, WI POST OFFICE PALMETTO, FI	BOX 2079	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VPD () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: W. GORDON WARDELL STD 06/17/2009