

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000051734

Entity Name: FLORIDA LINER FARM, INC.

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1108 W. HORATIO STREET  
TAMPA, FL 33606

## **New Principal Place of Business:**

72 LAUREL LANE  
FROSTPROOF, FL 33843

## **Current Mailing Address:**

1108 W. HORATIO STREET  
TAMPA, FL 33606

## **New Mailing Address:**

FEI Number: 20-8950618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHOBLEN, PAUL M  
1108 W. HORATIO STREET  
TAMPA, FL 33606 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: P  
Name: SCHOBLEN, LINDA L  
Address: 1108 W. HORATIO STREET  
City-St-Zip: TAMPA, FL 33606

Title: ST  
Name: SCHOBLEN, PAUL M  
Address: 1108 W. HORATIO STREET  
City-St-Zip: TAMPA, FL 33606

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: PAUL M SCHOBLEN

ST

03/03/2010

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

\_\_\_\_\_  
Date