

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000092987

Entity Name: B H MCFARLAND, INC.

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

412 RAVENNA ST S  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 903  
NOKOMIS, FL 34274

**New Mailing Address:**

FEI Number: 45-3618423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCFARLAND, HAROLD  
412 RAVENNA ST S  
NOKOMIS, FL 34275 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCFARLAND, BEVERLY  
Address: 412 RAVENNA ST S  
City-St-Zip: NOKOMIS, FL 34275

Title: VT  
Name: MCFARLAND, HAROLD  
Address: 412 RAVENNA ST S  
City-St-Zip: NOKOMIS, FL 34275

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: HAROLD D. MCFARLAND

VP

01/09/2012

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

\_\_\_\_\_  
Date