FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 17 1997 8:00am Secretary of State

DOCUMENT 1. Corporation Name	#	P93000047786	(7)

LAYTON POULTRY FARM, INC.

LATION	POULTNT PANIVI, INC.								
Principal Plac	e of Business	Mailing Address				T I HOUSENES DAN SOURCE SUPER CONTRACT	AMILIA MEMBERANTAN PAR		
4101 N. GALLA PLANT CITY FL US		4101 N. GALLAGHER PLANT CITY FL 33565 US		1					
00				ļ		3. Date Incorporated or Qualified 07/08/1993	3a. Date 04/29/	of Last Re /1996	port :
2. Principal F	lace of Business	2a. Mailing Address				4. FEI Number			plied For
21	11 - 2 -	26				59-3015059			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Re	
22 City & Stat	e	City & State				6. Election Campaign Financing		\$5.00	`
23		28				Trust Fund Contribution		Added to	
Zip	Country	Zip	Cou	intry		8. This corporation has liability for in	ntangible ta	x under s.	199.032,
24	25	29	30			Florida Statutes	Yes 🗆	No	
	9. Name and Address of Curre	nt Registered Agent		241		10. Name and Address of New Reg	istered Ag	ent	
	TON, JAMES W JR			81	Name				
	N. GALLAGHER			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
PLAI	NT CITY FL 33565			83					
				84	City		FL	85 Zip (Code
11. Porenant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	es the a	bove-r	named corre	oration submits this statement for the p		hangino its	s registered
office or i	registered agent, or both, in the Stati	of Florida, Such change was a	authorize	d by t	he corporation	oration submits this statement for the poon's board of directors. I hereby accep	t the appoir	itment as	registered
	irii tamiliar witri, and accept the oblig	gations of, Section 607.0505, Fig	orida Stat	wes.					
SIGNATURE	Signature: typica or printed name of registered ag	ent and title if applicable. (NOT	E Flegislere	d Ageni	signature require	ed when reinstaling)	DATE		
12.	CAMBLE A MINISTER CONTROL OF THE PERSON OF T	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR	S IN 12
TITLE	S	☐ DELETE	1.1 Ti	TLE				Change	Addition
NAME	LAYTON, MARIAN J.		1.2 N	AME					
STREET ADDRESS	4101 N. GALLAGHER RD.		1.3 \$1	TREET AL	DDRESS				ļ
CITY - ST - ZIP	PLANT CITY FL			TY-ST-	ZIP				-
TITLE		☐ DELETE	2.1 11				L.	Change	L Addition
NAME			2.2 N						
STREET ADDRESS				TREET AC]				
C-TY - ST - ZIP		☐ DELETE	2.40 31TI	ITY-ST	-ZIP			Change	Addition
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STREET ADDRESS									
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NAME			4. 2 N				_	3	
STREET ADDRESS				TREET A	DORESS				
CITY-ST-ZIP				ITY-ST-)				
TITLE		DELETE	5.1 TI		*		L	Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET A	DDRESS				
C(TY-ST-ZIF			5.4 C	1TY - ST -	ZIP			<u></u>	
TITLE		DELETE	6.1 Ti	TLE				Change	Addition
NAME			6.2 N	AME					
STREET ADORESS			638	TREET A	DDRESS				
CHY-SI-ZIP	<u> </u>			ITY-ST-					
14. Ldo here	by certify that the information suppli	ed with this filing does not quali	fy for the	exem	notion stated	in Section 119.07(3)(i), Florida Statutes	s. I further c	ertify that	the

Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marian Stay for MARIAN LAYTON 4-7-97 (813) 986-3173

32E034 (9/96)