## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P93000054214 (0)

## HIGHLAND PARK FARM CORPORATION

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Principal Place of Business Mailing Address									ı iddirədi ilə iqidə ilili dülli dölli		/IIII 81 <b>9</b> 18	HOCH HON DIGHTER
224 W MAII RICHMOND			P. O. BOX 5267 RICHMOND KY 40476-5267									
US			US					3. Date incorporated or Qualified 3a. Date of Last Report 07/30/1993 05/16/1995				•
2. Principal Place of Business			2a. Mailing Address					4.	FE) Number		7	Applied For
21			5]					NOT APPLICABLE				Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5.	Certificate of Status Desired			75 Additional
22		27						<u> </u>			Fe	e Required
City & State			Orty & State					6.	Election Campaign Financing			<b>00</b> May Be
Zip Country			<i>Z</i> (p	7	Country				Trust Fund Contribution			ded to Fees
24	<b>25</b>	29	24)	· · ·	30			8.	This corporation has liability for it Florida Statutes Yes		ix under	s 199.032,
	9. Name and Address of Curren						Florida Statutes Yes No  10. Name and Address of New Registered Agent					
					81	1	Name		Transcription of the state of t	9.0.0.0	gem	
PADTE	LA EDANCESCO											<del></del> .
BARTELLA, FRANCESCO 5230 NE 28TH AVE.					82		Street Addres	Address (P.O. Box Number is Not Acceptable)				
	JDERDALE FL 33308				83	-						
, 11. 154	DDENDALE FE 33300				ļ	_						
					84	(	City			FI	85	Zip Code
11. Pursuant t	o the provisions of Sections 607,0502	and <b>6</b> 0	7.1508, Florida Statute	es the al	bove r	L nar	ned corporat	100.5	submits this statement for the purp	upse of cha	LLLL andina it	s registered office
or registeri	ed agent, or both, in the State of Florid h, and accept the obligations of, Section	la. Suct	n chance was authorize	ed by the	0.00tb	Or a	ation's board	of d	frectors. Thereby accept the appoint	intment as	register	ed agent I am
SIGNATURE												
	Signature, typical or present name, of registered eyer to						graf ør, se priktiv	2 es 14		DATE		
12.	OFFICERS AND	) [ )#-{E_1	DELETE	13					ADDITIONS/CHANGES TO OFFI			
TITLE	D CHANNON MATCHIN	<del></del>			TITLE					L	Chang	e [] Addition
NAME SHANNON, JAMES J JR STHEET ADDRESS 5230 N.E. 28TH AVENUE					NAME							
			1 3 STRE									
DITY-ST-ZIP TITLE	FORT LAUDERDALE FL		DELETE 2.11			i I - 2	Z1F1				Change	a D Addition
NAME			Disten		2 1 TII.E 2 2 NAME					L	_ Unang	e 🔲 Addition
STREET ADDRESS						THEET ADDRESS						
CITY-ST-ZIP												
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STREET ADDRESS				- 1	STREET	: AF	DOBESS					
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TITLE			DELETE		TITLE						Change	e 🗍 Addition
NAME				4.2	NAMÉ							
STREET ADDRESS				43	STREET	AD:	ORESS					
CITY - ST - ZIF				4.4	CITY - S	1 - 7	718					
TITLE		<u>-</u> -	□ DELETE	5	1 THLE	•••••					Change	e 🔲 Addition
NAME				5.2	NAMÉ							
STREET ADORESS				5.3	STREET	ΑĐ	ORESS					
CITY-ST-ZIP					CITY - S							
TITLE			□ DELETE		1 THILE						Change	e 🔲 Addition
NAME				6.2	NAME							
STREET ADDRESS				6.3	STREE!	A()	ORESS					
CITY . ST. 7IP					0174 0	1 1	7:0					

14. If do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trusten 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:

SIGNATURE:

SIGNATURE:

:R2E034 (12/95)