

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

FILED

Feb 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000070817 (0)

1. Corporation Name

HAMBRA FARMS, INC.

Principal Place of Business

Mailing Address

ROUTE 1, BOX 196Y
LAKE DISSTON RD., SR 305A
BUNNELL FL 32110

ROUTE 1, BOX 196Y
LAKE DISSTON RD., SR 305A
BUNNELL FL 32110-9801



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/12/1993		3a. Date of Last Report 03/20/1996	
21		26		4. FEI Number 59-3209794		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
23		28					
Zip		Country		24		25	
29		30					
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HAMBLIN, D.R. ROUTE 1, BOX 196Y LAKE DISSTON RD., SR 305A BUNNELL FL 32210				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			
				85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMBLIN, D.R.	1.2 NAME	
STREET ADDRESS	RT. 1, BOX 196Y	1.3 STREET ADDRESS	
CITY-ST-ZIP	BUNNELL FL 32110	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMBLIN, JOYCE	2.2 NAME	
STREET ADDRESS	RT. 1, BOX 196Y	2.3 STREET ADDRESS	
CITY-ST-ZIP	BUNNELL FL 32110	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADDOCK, DALE A	3.2 NAME	
STREET ADDRESS	P.O. BOX 221 N/A	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADDOCK, CAROLE P	4.2 NAME	
STREET ADDRESS	P.O. BOX 221 N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEVILLE FL 32190	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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:

[Signature]

2/10/5/97

904 457 4445

CR2E034 (9/96)