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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000082551 (1)

JOINER & SON FARMS, INC.

Principal Pl	ace of Business	Mailing Address	Mailing Address				1 (00)1001 FIR 18180 11111 00111 90111 0011	(BARN) (A)(D			HU
20001 SW 344 ST FLORIDA CITY FL 33034 US		20001 SW 344 ST FLORIDA CITY FL 33034- US	20001 SW 344 ST FLORIDA CITY FL 33034-1407								i
					4		Date Incorporated or Qualified 11/23/1993		ate of Las 31/199		t
2. Principal	l Place of Business	2a. Mailing Address 26			4.	FEI Number 65-0455258	Applied For Not Applicable				
Suite, Ap	pt. #. etc.	Suite, Apt #, etc				5.	Certificate of Status Desired			5 Additi	
City & Si 23	#1.************************************	City & State				Election Campaign Financing Trust Fund Contribution			00 May led to Fe		
Ζφ 24	Gountry 25	Country Zip 25 29					This corporation has liability for Florida Statutes	intangible Yes		∍rs. 199).032,
	9. Name and Address of Curre	nt Registered Agent	30	[10.	Name and Address of New Re				
H/	ANSON, CARL			81	Name		WPW	· · · · · · · · · · · · · · · · · · ·			-
	3 NE 15 ST			82	Street Add	iress (P	O. Box Number is Not Acceptate	vie)			
H	OMESTEAD FL 33030				0,700,7100	,, 000 (r					
				63							
				84	City			FL	85 Z	ip Code)
11. Pursuar office o	nt to the provisions of Sections 607.05 or registered agent, or both, in the State I am familiar with, and accept the oblic	02 and 607 1508, Florida Statu of Florida, Such change was	tos, the at authorize	oove d by	e-named cor the corpora	poration ation's b	n submits this statement for the ploard of directors. I hereby accept	ourpose of	f changin jointment	g its regis	jistered stered
		ations of, Section 607.0505, F	lorida Stat	utes	3 .					_	
SIGNATURI	Signative is politic pointed name of registered ag	s rand title if applicable (NO	TE: Registere:	i Age	nt signature requi	ired when	reinstating)	DATE	····		
12.	OFFICERS AN	1-1		13.		A	ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN	12
TILE	JOINER, JAMES B JR	DELETE	1.1 70						☐ Chang	је 🗌	Addition
NAMÉ	00004 OH/ 044 OT		1.2 NA								
STREET ADDRES CITY - ST - ZIP	FLORIDA CITY FL		l l		ADDRESS						
Tillé	ST	DELETE	1.4 CI 2 1 TI		1-219	-			Chang	na	Addition
NAME	JOINER, SUSAN F	C) better	22 N/						LLI Cliant	1 ₂ —	, MOURIUR
STREET ADDRESS	AAAAA OH AAA OT				ADDRESS						
CITY - ST - ZIP	FLORIDA CITY FL	,	2 4 C				٠.	* 1			
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NAME	JOINER, JAMES S		3 2 NA	ME							
STREET ADDRESS			3 3 51	REET	ADDRESS						
CITY-\$1-7#	FLORAL CITY FL		3.4. CI	TY - S	T-ZIP						
TITLE	V VIII VIII V	□ DELETE	4.1 TH	LE					Chang	je 🔲	Addition
NAME	JOINER, JULIA D		4. 2 N	AME							
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	FLORIDA FL	F1	4.4 CF		r-ZIP						
TITLE		☐ DELETE	5.1 T(1	-					Chang	ж 🗀	Addition
NAME.			5.2 NA								
STREET ADDRESS	8				ADDRESS						
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			61111						Chang	ie 🛄	Addition
NAME CIECTI ADGOLOG			62 NA								
STREET ADORESS	۱ د		6.3 ST	REET	ADDRESS						

64 CITY-ST-ZIP

14. If 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 suppliemental 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 regioner or the region of the corporation or the region of the corporation or the region of the corporation of the region of the region of the corporation of the region of the corporation of the region of the reg