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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000087488 (1)

WILLISTON FARMS, INC.

3300 N. FEDERAL HWY.	3300 N. FEDERAL HWY.					
FT. LAUDERDALE FL 33306	FT. LAUDERDALE FL 33308-1035					
Principal Place of Business	Mailing Address					

## **FILED** Apr 08 1997 8:00am Secretary of State



Principal Plac	ae of Business	mailing i	Agaress						
3300 N. FEDE FT. LAUDERD			3300 N. FEDERAL HWY. FT. LAUDERDALE FL 33306-1035						
						3. Date Incorporated or Qualified 12/22/1993	3a. Date 04/1	of Last	•
2. Principal F	Place of Business	2a. Maili	ng Address			4. FEI Number			Applied For
21		26				65-0504741			lot Applicable
Suite, Apt	#, etc.	Suite 27	e, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Sta	te		& State			6. Election Campaign Financing		\$5.00	May Be
23			28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Countr	у	8. This corporation has liability for	intangible ta	x under	s. 199.032,
24	25	29		30			Yes 🗌		
	9. Name and Address of C	urrent Registered	Agent			10. Name and Address of New Re	gistered A	jent	
HU	NT, JR. JAMES S.			81	Name				
	IO NW 46TH ST			82	Etront Add	dress (P.O. Box Number is Not Acceptal	nio)		
	ALA FL 34482			04	Sireer Add	iress (F.O. box Nulliber is Not Acceptar	יפונ		
30				83		· · · · · · · · · · · · · · · · · · ·			
					<u> </u>				
				64	City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 60	7 0502 and 607 150	08 Florida Statu	ites the above	A-named cor	poration submits this statement for the		hanoino	its registered
office or	registered agent, or both, in the	State of Florida, Su	ich change was	authorized b	v the corpora	ation's board of directors. I hereby acce	pt the appoi	ntment a	s registered
agent. Fa	am familiar with, and accept the	obligations of, Sect	tion 607.0505, F	lorida Statute	S.				
SIGNATURE	Signature, by est or printed name of register			er rootstaan		ired when reinstaling)	DATE		
12.		S AND DIRECTORS		13.	ent signature requ	ADDITIONS/CHANGES TO OFFIC		IRECTO	BS IN 12
TITLE	PD	O AND DIRECTOR	DELETE	1.1 TITLE		70071101107070111000110 01711		Change	
NAME	HUNT, JR. J S		<u> </u>	1.2 NAME			•		
	8410 NW 46 ST								
STREET ADDRESS	OCALA FL				T ADDRESS				
CITY-ST-ZIP	OCALA FL		DELETE	1.4 CITY-	ST-ZIP			Change	Addition
TITLE			C DELETE	2.1 TITLE			L	crange	L AQUIRO
NAME	1			2.2 NAME					
STREET ADDRESS				4	T ADDRESS				
CITY - ST - ZIP				2 4 City	ST-ZIP				
TITLE			DELETE	3.1 TITLE			L	Change	Addition
NAME				3.2 NAME	1				
STREET ADDRESS				3.3 STREE	T ADDRESS				
CITY - S1 - 71P				3.4. CITY	ST-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAMÉ				4. 2 NAMI	:				
STREET ADDRESS				4.3 STREE	T ADDRESS				
CHY-SY-ZIP				4 4 CITY-	ST-ZIP				
TITLE			☐ DELETE	5.1 TITLE			Ĭ.	Change	Addition
NAME				5.2 NAME	1				
STREET ADDRESS					T ADDRESS	•			
CHY-S1-ZIF				5.4 CITY-	ł				
TITLE			DELETE	6.1 TITLE	V1 - E11	**************************************	<u> </u>	Change	Addition
NAM!				62 NAME			•		
					T ADDRESS				
STREET AODRESS				1	L				
City - \$1 - ZiF	1			64 CITY-	SI-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.