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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087597 (9)

## FILED Jan 20 1998 8:00am Secretary of State

	POULTRY FARMS, INC.	10067597 (9)		5 JEDNICO 1118 10 110 1111 1111 1111 1111 1111 1	))/ 5 <b>188: 6</b> 118 <b>:</b> (841) 188: 488)
Principal Plac	ce of Business	Mailing Address		r noarroor ind varou nith obert oblit datif datif datif i di	
842 LIMPET DR SANIBEL ISLAND FL 33957		842 LIMPET DR			
SAMBEL ISL	ANU PL 33807	SANIBEL ISLAND FL 33	8D/	DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				12/23/1993	
<b>└</b>	Place of Business	2a. Mailing Address	,e	4. FEI Number	Applied For
21 Suite. Apt.	# etc	Suite, Apt. #, etc.		65-0456759	Not Applicable
22	", <b>U</b> ().	27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
		City & State	,	6. Election Campaign Financing	\$5.00 May Be
23	3 28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29	30		Yes □ No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered	Agent
	attama, Henry H Jr		81 Name		,
	MERSHON SAWYER JOHNSTO		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
200 S BISCAYNE BLVD #4500 FIRST UNION FIN		RST UNION FIN	83		
MU	AMI FL 33131-2387		[00]		
			<b>B4</b> 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 re					t changing its registered
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	· · · · · · · · · · · · · · · · · · ·	3			•
	Signature, typed or printed name of registered as		l£ · Aegistered Agent signature requ		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PS DATH DICHARD D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME Street address	MC GRATH, RICHARD P 842 LIMET DR.		1.2 NAME		
CITY-ST-ZIP	SANIBEL ISLAND FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	GARAGE TOCKED TE	DELETE	2.1 TITLE		Change Addition
NAME		<del></del>	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	_		2 4 CITY-ST-ZIP		
TITLE	•	☐ DELET <b>e</b>	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Dr. ex-	3.4 CITY-ST-ZIP		·
TITLE		DELETE	. 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP		Change Addition
NAME		ר"ו הנינונ	5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 City-St-Zip		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME		<del>-</del> -	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		]

14. Thereby 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 logal effect as if made under eath; 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 atjachment with an ardress.

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