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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARIMENT OF STAT

**FILED** 

Apr 29 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400003452 (7)

SPRING DALE FARMS, INC.

Principal Place of Business Mailing Address 8000 MARGATE BLVD MARGATE FL 33083 MARGATE FL 33063-3030						
					3. Date Incorporated or Qualified 01/07/1994	3a. Date of Last Fleport 02/05/1996
21	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0460259	Applied For Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State	- F		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25 9. Name and Address of Currer	Zip 29 29	Country 30	·	8. This corporation has liability for its Florida Statutes  10. Name and Address of New Reg.	Yes No
	IGEY, RICHARD J D S FEDERAL HWY		81	Name Street Addre	ass (P.O. Box Number is Not Acceptab	
	ART FL 34994		83	Silver Addie	iss (F.O. Box Normber is Not Acceptable	
			84	City		FL 85 Zip Code
11. Pursuant office or ragent. I a					oration submits this statement for the property acceptors. I hereby acceptors.	urpose of changing its registered t the appointment as registered
12,	Signature, typed or printed name of registered ag-	out and the if applicable (NO)	L. Registered Ager	it signature requirer	d when recretating)  ADDITIONS/CHANGES TO OFFIC	DATE EDG AND DIRECTORS IN 12
TITLE	D	DELFTE	1.1 101.6		ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME STREET ADDRESS	DALE, BURL 8000 MARGATE BLVD MARGATE FL 33063		1.2 NAME 1.3 STREET A			
CITY-ST-ZIP TITLE NAME	D DALE, BARBARA	DELFTE	2.1 TITLE 2.2 NAME	- ZII'		Change Addition
STREET ADORESS	8000 MARGATE BLVD MARGATE FL 33063		2.3 STREET A 2.4 CHY-S			
TITLE NAME		DELETE	3.1 TITUE 3.2 NAME			Change Addition
STREET ADDRESS CITY-ST-ZIP			3.3 STRLET ( 3.4. CITY - S			
NAME		∐ DELETE	4.1 TITLE 4. 2 NAME	*DODLOG		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	4.3 STREET / 4.4 CITY - ST 5.1 TITLE	[		☐ Change ☐ Addition
NAME Street address			5.2 NAME 5.3 STREET A	ì		
CITY-ST-ZIP TITLE NAME		DELETE	5.4 CITY-ST 6.1 TITLE 6.2 NAME	- ZIP		Change Addition
STREET ADDRESS			6.3 STREET	ADDRESS		

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 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 eppears in Block 12 or Block 13 if changed, or on an attachment with an address.