**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000007721

Country

1. Corporation Name

Suite, Apt. #, etc.

City & State

22

23

Zip

TERRA NOVA FARMS, INC.

Principal Place of Business	Mailing Address		
18443 RAINTREE DRIVE	18443 RAINTREE DRIVE		
BROOKSVILLE FL 34601	BROOK\$VILLE FL 34601		

26

27

28

Suite, Apt. #, etc.

City & State

Zip

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

01/21/1994 4. FEI Number

59-3232529

**FILED** Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90086 021 \*\*\*150.00

24	25	29	30			Personal Property Tax.		☐ Yes	□No			
Name and Address of Current Registered Agent						10. Name and Address of New Ro	egistered A	gent				
				81	Name				ì			
PAYNE, DEBORA A					Street	Address (P.O. Box Number is Not Acceptate	ole)					
18443 RAINTREE DRIVE					Oli CC.	Addiese (F.O. Dex Hamber to Her Hosep.	,					
BROOKSVILLE FL 34601				83								
				$\sqcup$				7-1-				
	•			84	City		FL		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 registere	de la companya del companya de la companya del companya de la comp	(NOTE: Besistand	Agost	cional ya e	equired when reinstating)	DATE		}			
		S AND DIRECTORS	13.	Agent	signature re	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12			
TITLE	VD	DEL		n E	<del>'</del>	ADDITIONS/CHANGES TO OFF	IOLINO AINE	Change	Addition			
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NAME	PAYNE, DOUGLAS C				[				ł			
STREET ADDRESS	18443 RAINTREE DRIVE				address							
CITY-ST-ZIP	BROOKSVILLE FL 34601			TY-ST	-ZIP		<u> </u>	Change	Addition			
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CITY-ST-ZIP			115 6 41			Lin Continu 110 07/2\/i) Florido Statutas I	C		4			

Country

I 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, with all other like empowered.

SIGNATURE:

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable