


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000094193

1. Entity Name
HART FARM, INC.



Principal Place of Business
**2909 MILLWOOD RD.
MILLWOOD, VA 22646 US**

Mailing Address
**PO BOX 275
MILLWOOD, VA 22646 US**

DO NOT WRITE IN THIS SPACE



02252006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3285305 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**TURNER, LESLIE C JR
104 SE 1ST AVE
STE A
OCALA, FL 34471**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD HART, E. C. 2909 MILLWOOD RD MILLWOOD, VA 22646 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DST HART, SUSAN 2909 MILLWOOD RD MILLWOOD, VA 22646 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP HART, E.C. 2909 MILLWOOD RD MILLWOOD, VA 22646 |
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03/17/06-80025-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susan Hart* SECRETARY 3/1/06 (540) 837-1411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #