2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 04, 2008 8:00 am
Secretary of State
08-04-2008 90033 027 ***550.00

DOCUMENT # P95000009374

1. Entity Name

L & D FARMS, INC.

Principal Place of Business	Mailing Address
18737 CRESCENT ROAD ODESSA FL 33566	18737 CRESCENT ROAD ODESSA FL 33566

2nd MOORE CR2E034 (4/08)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
18737 Crescent Rd	18737 Crescent Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Odessa Fl 33556	
City & State	City & State
Odessa Fl	Odessa Fl
Zip 33556 Country USA	Zip 33556 Country USA

4. FEI Number 59-3296225 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VAUGHN, LARRY G 18737 CRESCENT ROAD ODESSA FL 33566	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: X Larry G Vaughn 7-3-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
DUE BY September 3, 2008
Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the $400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is $150.00. ☐

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VAUGHN, LARRY G 18737 CRESCENT ROAD ODESSA FL 33566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Heather V Boyer 18737 Crescent Rd Odessa Fl 33556	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V VAUGHN, DIANE M 18737 CRESCENT ROAD ODESSA FL 33566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S VAUGHN, DUSTIN G 18737 CRESCENT ROAD ODESSA FL 33556	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	—	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: X Larry G Vaughn 7-3-08 727-424-3448
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #