

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montanari
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028074 (9)

1. Corporation Name

CORN FIELDS HEALTH FOODS, INC.



Principal Place of Business

7552 NAVARRE PKWY
SUITE 3
NAVARRE FL 32566

Mailing Address

7552 NAVARRE PKWY
SUITE 3
NAVARRE FL 32566

2. Principal Place of Business

21 6925 Navarre Parkway
Suite, Apt. #, etc.

22 City & State
23 Navarre FL

24 Zip
32566

25 Country
USA

2a. Mailing Address

26 6925 Navarre Parkway
Suite, Apt. #, etc.

27 City & State
28 Navarre FL

29 Zip
32566

30 Country
USA

3. Date Incorporated or Qualified

04/07/1995

3a. Date of Last Report

4. FEI Number

64-3552569

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BROWN, ELIZABETH A
7552 NAVARRE PKWY
SUITE 3
NAVARRE FL 32566

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 6925 Navarre Parkway

84 City

Navarre

FL

85 Zip Code

32566

11. Pursuant to the provisions of Sections 607.0602 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0608, Florida Statutes.

SIGNATURE

Elizabeth A Brown, Secretary

119.916

(Date)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
BROWN, ELIZABETH A
2567 VALLEY RD
NAVARRE FL 32566

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
CONRAD, GWEN J
8271 GULF BLVD.
NAVARRE BEACH FL 32566

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
BROWN, PAUL P
2567 VALLEY RD
NAVARRE FL 32566

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
RENNER, HARRY
8271 GULF BLVD.
NAVARRE BEACH FL 32566

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14 TITLE
15 NAME
16 STREET ADDRESS
17 CITY-STATE-ZIP
☐ Change ☐ Addition

18 TITLE
19 NAME
20 STREET ADDRESS
21 CITY-STATE-ZIP
☐ Change ☐ Addition

22 TITLE
23 NAME
24 STREET ADDRESS
25 CITY-STATE-ZIP
☐ Change ☐ Addition

26 TITLE
27 NAME
28 STREET ADDRESS
29 CITY-STATE-ZIP
☐ Change ☐ Addition

30 TITLE
31 NAME
32 STREET ADDRESS
33 CITY-STATE-ZIP
☐ Change ☐ Addition

34 TITLE
35 NAME
36 STREET ADDRESS
37 CITY-STATE-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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. I or on an attachment with an address.

SIGNATURE: Elizabeth A Brown, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
119.916 904.934.5777
(Date)

CR2E034 (12/95)