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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000033529 (5)

1. Corporation Name

CROWN POINTE FARM, INC.



Principal Place of Business

3004 PLANTATION ROAD  
WINTER HAVEN FL 33884

Mailing Address

3004 PLANTATION ROAD  
WINTER HAVEN FL 33884

3. Date Incorporated or Qualified  
04/24/1995

3a. Date of Last Report

2. Principal Place of Business

21 5999 STATE RD S42 EAST

Suite, Apt. #, etc.

22

City & State

23 WINTER HAVEN FL

Zip

24 33884

Country

25 POLK

2a. Mailing Address

26 5999 STATE RD S42 EAST

Suite, Apt. #, etc.

27

City & State

28 WINTER HAVEN FL

Zip

29 33884

Country

30 POLK

4. FEI Number

59-3312967

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

MCKIBBEN, JEFF J ESQ.  
106 SO. 5TH AVENUE  
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip 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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME GROETZINGER, ROBERT W  
STREET ADDRESS 3004 PLANTATION ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE VSD ☐ DELETE

NAME GROETZINGER, DANIS M  
STREET ADDRESS 3004 PLANTATION ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

5999 STATE RD S42 EAST  
WINTER HAVEN, FL 33884

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

5999 STATE RD S42 EAST  
WINTER HAVEN FL, 33884

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 unchanged, or on an attachment with an address.

SIGNATURE:

Robert W Groetzinger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 27 1996

Date

941-325-0959

Daytime Phone #

CR2E034 (12/95)