

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000058971

FILED
Apr 20, 2009
Secretary of State

Entity Name: CORRY FARMS, INC.

Current Principal Place of Business:

319 NORTH DUVAL STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

113 N MADISON ST
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-3338337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORRY, WILLIAM W
318 N. MONROE STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORRY, MARGARET H
Address: 319 NORTH DUVAL STREET
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: CORRY, WILLIAM W
Address: POST OFFICE BOX 669 N/A
City-St-Zip: TALLAHASSEE, FL 32302

Title: D () Delete
Name: CORRY, JOHN A
Address: 1018 MICCOSUKEE ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: CORRY, JAMES E JR.
Address: 90 KENTUCKY AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: CORRY, STEPHEN T
Address: 5554 PEDRIC PLANTATION LANE
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A CORRY

D

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date