

08/23/95 10:52

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8/23/95 FLORIDA DIVISION OF CORPORATIONS 4:27 PM  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET  
TO: DIVISION OF CORPORATIONS FROM: JOHNSON, BLAKELY, POPE, BOKER, RUPPE  
DEPARTMENT OF STATE 911 CHESTNUT  
STATE OF FLORIDA P.O. BOX 1368  
409 EAST GAINES STREET CLEARWATER FL 34617-0000-0000000  
TALLAHASSEE, FL 32399 CONTACT: TABBA LEE  
FAX: (904) 922-4000 PHONE: (813) 461-1818  
FAX: (813) 461-8617  
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.  
NAME: WILLOW BRIDGE FARMS, INC.  
FAX AUDIT NUMBER: H95000009353 CURRENT STATUS: REQUESTED  
DATE REQUESTED: 08/23/1995 TIME REQUESTED: 16:27:44  
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0  
NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX  
ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 076666002140

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((H95000009353))

\*\* ENTER 'M' FOR MENU. \*\*

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*to 10072  
Paper - 526  
Fax audit #*

*604*

05 AUG 25 PM 1:22

FILED

08 AUG 24 AM 8:07

08 AUG 24

August 24, 1995

JOHNSON BLAKELY POPE BOKER RUPPE

CLEARWATER, FL

SUBJECT: WILLOW BRIDGE FARMS, INC.  
REF: W95000017072

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

Section 15.16(3), Florida Statutes, requires each document to contain in the lower left-hand corner of the first page the

name, address, and telephone number of the preparer of the original and, if prepared by an attorney licensed in this state, the preparer's Florida Bar membership number.

The FAX audit number must be on the top and bottom of each page of the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole  
Corporate Specialist

FAX Aud. #: H95000009353  
Letter Number: 195A00039551

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida  
32314

H95000009353

**ARTICLES OF INCORPORATION OF WILLOW BRIDGE FARMS, INC.****ARTICLE I - Name and Address**

The name of this corporation is WILLOW BRIDGE FARMS, INC. The mailing address of the corporation is: 911 Chestnut Street, Clearwater, Florida 34616. The address of the corporation's principal office is 911 Chestnut Street, Clearwater, Florida 34616.

**ARTICLE II - Duration**

This corporation shall have perpetual existence.

**ARTICLE III - Capital Stock**

This corporation is authorized to issue 100,000 shares of common stock, which shall be designated as "Common Shares." The par value of each share of stock shall be One Cent per share (\$.01).

**ARTICLE IV - Preemptive Rights**

Every shareholder, upon an offer for sale for cash of any new stock or authorized but unissued stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE V - Initial Registered Office and Agent**

The street address of the initial registered office of this corporation is 911 Chestnut Street, Clearwater, Florida 34616, and the name of the initial registered agent of this corporation at that address is ROGER LARSON.

**ARTICLE VI - Incorporator**

The name and address of the person signing these Articles is:

Name

Address

ROGER LARSON

911 Chestnut Street  
Clearwater, Florida 34616

FL Bar #: 0045790

Roger Larson, Esquire  
Johnson, Blakely, Pope,  
Bokor, Ruppel & Burns, P.A.

911 Chestnut Street  
Clearwater, Florida 34616  
(813) 461-1818

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**ARTICLE VII - Indemnification**

The corporation shall indemnify any officer or director, or any former officer or director to the full extent permitted by law.

**ARTICLE VIII - Amendment**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 23rd day of August, 1995.

  
ROGER LARSON


H95000009353

**CERTIFICATE DESIGNATING REGISTERED AGENT  
AND STREET ADDRESS FOR SERVICE OF PROCESS  
WITHIN FLORIDA**

Pursuant to Fla. Stat. §48.091, WILLOW BRIDGE FARMS, INC., desiring to organize under the laws of the State of Florida, hereby designates ROGER LARSON, located at 911 Chestnut Street, Clearwater, Florida 34616, as its registered agent to accept service of process within the State of Florida.

**ACCEPTANCE OF DESIGNATION**

The undersigned hereby accepts the above designation as registered agent to accept service of process for the above-named corporation, at the place designated above, and agrees to comply with the provisions of Fla. Stat. §48.091(2) relative to maintaining an office for the service of process.

  
\_\_\_\_\_  
ROGER LARSON

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FILED  
05/25/05 PM 1:23  
TALLAHASSEE, FLORIDA  
H95000009353

P95000066011

CARSON-NEWMAN COLLEGE



JEFFERSON CITY FLORIDA 32760

City/State/Zip

Phone #

700002188127--4  
-05/22/97--01063--009  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
97 MAY 22 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

10-2-97  
WV

**ARTICLES OF DISSOLUTION  
OF  
WILLOW BRIDGE FARMS, INC.**

TO THE SECRETARY OF STATE OF THE STATE OF FLORIDA:

Pursuant to the provisions of Florida Statutes, Sections 607.1402 and 607.0704, the undersigned corporation submits the following articles of dissolution:

1. The name of the corporation is Willow Bridge Farms, Inc.
2. The dissolution was authorized on May 8, 1997, effective upon filing of these Articles.
3. The dissolution was unanimously adopted by all shareholders and directors, being a number sufficient for approval.

Dated May 19<sup>th</sup>, 1997.

WILLOW BRIDGE FARMS, INC.

By: Robert Drinnen  
Robert Drinnen, President

\\Server\shared\clients\0112\ARTICLES OF DISSOLUTION.doc

**FILED**  
97 MAY 22 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section \_\_\_\_\_, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: Willow Bridge Farms, Inc. EIN or SS#: \_\_\_\_\_

Address: 911 Chestnut Street  
Clearwater, FL 34616

Amount: \$165.00 Date Paid \_\_\_\_\_

Reason for claim: Corp. dissolved no AR required - P95000066011  
SPT 6/17/97

Certified true and correct this 7 day of \_\_\_\_\_, 19\_\_\_\_.

Signature \_\_\_\_\_

\* Must be completed if authority is other than Section 215.26, Florida Statutes.

**For Agency Use Only**

Agency recommends approval of above claim and submits the following information to substantiate the claim: Amount of recommended refund \$ \$165.00

The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on State Treasurer's Receipt No. 97434 dated 06-16-97

Name of Account \_\_\_\_\_

4520213000145300000000010000

Statutory Authority for Collection 607

It is requested that payment be made from the following account:

NAME OF ACCOUNT: \_\_\_\_\_

45202130001453000000022002000

Certified true and correct this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

Department of State, Division of Corporations  
(Agency)

(Authorized Signature and Title)