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Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000079098 (6)

1. Corporation Name
PEURIFOY FARMS, INC.

Principal Place of Business
205 115TH STREET NORTHEAST
BRADENTON FL 34202

Mailing Address
205 115TH STREET NORTHEAST
BRADENTON FL 34202-9165



| | | | | | |
|--------------------------------|--|------------------------|--|---|--------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 Suite, Apt. #, etc. | | 26 1884 54th St W | | 10/12/1995 | 01/29/1996 |
| 22 City & State | | 27 Suite, Apt. #, etc. | | 4. FEI Number | Applied For |
| 23 Zip | | 28 Bradenton | | 65-0627782 | Not Applicable |
| 24 Country | | 29 34209 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 25 | | 30 Manatee | | 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

PEURIFOY, BRENDA V
205 115TH STREET NORTHEAST
BRADENTON FL 34202

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|----------------------------|---|--|
| TITLE | D | 1.1 TITLE | |
| NAME | PEURIFOY, BRENDA V | 1.2 NAME | |
| STREET ADDRESS | 205 115TH STREET NORTHEAST | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | BRADENTON FL 34202 | 1.4 CITY - ST - ZIP | |
| TITLE | D | 2.1 TITLE | |
| NAME | PEURIFOY, J T | 2.2 NAME | |
| STREET ADDRESS | 205 115TH STREET NORTHEAST | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | BRADENTON FL 34202 | 2.4 CITY - ST - ZIP | |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 3.4 CITY - ST - ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 4.4 CITY - ST - ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 5.4 CITY - ST - ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | |

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

SIGNATURE:

T. Peurifoy MD 4-7-97 941.7920157

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)