

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000092919 (6)

1. Corporation Name

LITTLE CREEK FARM, INC.



Principal Place of Business

3330 PELL MELL DRIVE
ORLANDO FL 32818

Mailing Address

3330 PELL MELL DRIVE
ORLANDO FL 32818

2. Principal Place of Business

2a. Mailing Address

21 8635 CR 561

26 Po Bx 121605

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Clermont FL

28 Clermont FL

Zip

Zip 34711-1605

Country

Country

24 34711

25

29 1605

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/04/1995

3a. Date of Last Report

4. FET Number

59-3357129

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

10. Name and Address of New Registered Agent

CALLAHAN, JANE D
800 NORTH MAGNOLIA AVENUE
SUITE 1500
ORLANDO FL 32803

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's signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
JOYCE, SHANNON L
3330 PELL MELL DRIVE
ORLANDO FL 32818

TITLE ☐ DELETE

D
LAFREZ, W. BRUCE
3330 PELL MELL DRIVE
ORLANDO FL 32818

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

8635 CR 561

1.4 CITY - ST - ZIP

Clermont FL 34711

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

8635 CR 561

2.4 CITY - ST - ZIP

Clermont FL 34711

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 if changed, or on an attachment with an address.

SIGNATURE:

Shannon L. Joyce

Shannon L. Joyce

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/96

407

897-4320

Date

Daytime Phone #

CR2E034 (12/95)