

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000010194

Entity Name: BROADMOOR FARMS, INC.

FILED  
Apr 21, 2004  
Secretary of State

## Current Principal Place of Business:

6765 NW 73RD PLACE  
OCALA, FL 34482

## New Principal Place of Business:

6765 NW 73RD PLACE  
OCALA, FL 34482 US

## Current Mailing Address:

6765 NW 73RD PLACE  
OCALA, FL 34482

## New Mailing Address:

6765 NW 73RD PLACE  
OCALA, FL 34482 US

FEI Number: 59-3365810

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, LEROY R  
4210 WEST SPRUCE STREET  
SUITE 202  
TAMPA, FL 33607 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: KEARNS, SUZANNE M  
Address: 6765 NW 73RD PLACE  
City-St-Zip: OCALA, FL 34482

Title: D ( ) Delete  
Name: KEARNS, WILLIAM J  
Address: 6765 NW 73RD PLACE  
City-St-Zip: OCALA, FL 34482

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KEARNS, SUZANNE M  
Address: 6765 NW 73RD PLACE  
City-St-Zip: OCALA, FL 34482 US

Title: D (X) Change ( ) Addition  
Name: KEARNS, WILLIAM J  
Address: 6765 NW 73RD PLACE  
City-St-Zip: OCALA, FL 34482 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM J KEARNS

D

04/21/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date