## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## May 05, 1999 8:00 am = Secretary of State

05-05-1999 90179 005 \*\*\*150.00

A CONTRACT TO CALL BUILD STATE SAME AND SAME AND LOSS TO SEE THAT BUILD HAD THE

## DOCUMENT # P96000097741

GARDNER'S FARM, INC.

Principal Place of Business Mailing Address									
200 HWY 218 AIDDLEBURG FL 32068		3659 NALLS LANE MIDDLEBURG FL 32068				DO NOT WOITE IN THE	e edace		
J\$						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
								}	
2. Principal Place of Business 2a. Mailing Address						12/04/1996 4. FEI Number	TA	oplied For	
2. Principal Place of Business 22. Walning Addition			635			59-3406816	<b>├</b> ─- <b>┼</b> ─	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional	
2]		27				5. Certifcate of Status Desired		equired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	
3		28				Trust Fund Contribution		to Fees	
Zip Country		Zip Country			8. This corporation owes the current year Ir	ntangible			
4	25	293	30		·	Personal Property Tax.	Yes	□No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	I Agent		
CARRAGO LARRY O				31 /	Name			{	
	DNER, LARRY G		1	32 :	Street Addre	Idress (P.O. Box Number is Not Acceptable)			
	NALLS LANE		Ĺ						
MIUL	DLEBURG FL 32068	83					}		
			1	34	City		85 Zip	Code	
				ĺ	•	Fi	<del>-</del> 1 1		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was aut	horized I	by th	named corpo e corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint	of changing its pintment as re	egistered	
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg			egistered A	gent si	gnature required	when reinstating) DATE			
12.	OFFICERS AND DIRECTORS				<del></del>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12 ☐ Addition	
TITLE	PD	☐ DELETE	1.1 TITLE		ł		change	CT vaginou	
NAME	GARDNER, LARRY G		1.2 NAME		}			1	
STREET ADDRESS	3659 NALLS LANE				DORESS				
CITY-ST-ZIP			1.4 CITY		ZIP		[] Change	Addition	
TITLE	TD	☐ DELETE	2.1 7171		ĺ		C Outsings		
NAME	GARDNER, LAURA L	. 2.21						1	
STREET ADDRESS	3659 NALLS LANE		2.3 STREET		i				
CITY-ST-ZIP	MIDDLEBURG FL 32068	☐ DELETE	2.4 CIT 3.1 TITL		ZIP		Change	Addition	
TITLE			l .		,		C average		
NAME			3.2 NAM		DORESS			Ì	
STREET ADDRESS								į	
CITY-ST-ZIP	<del></del>	☐ DELETE	3.4 CITY		<u> </u>	<del></del>	Change	Addition	
TITLE.		<u></u>	4.2 NA		}				
NAME ETDEET ADDRESS					DDRESS			Į	
STREET ADDRESS	~		4.4 CITY		1			}	
CITY-ST-ZIP TITLE			5.1 TITL		<u> </u>		Change	Addition Addition	
NAME	(		5.2 NAM		(		-	(	
	}		63 STD	RET AT	DDDESS			ł	

CITY-ST-ZIP 14. I 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

☐ DELETE

Addition

☐ Change

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