## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Sep 12, 2001 08:00 AM DOCUMENT # P9700011277 Entity Name **Secretary of State** D. & H. PET FARMS, INC. Principal Place of Business Mailing Address 3103 S SAPP ROAD 3103 S SAPP ROAD PLANT CITY FLPLANT CITY FL 33567 33567 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3427649 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHRISTOPHER A VORDERBURG 1202 PINEDALE DRIVE Street Address (P.O. Box Number is Not Acceptable) PLANT CITY FL33567 US City Zip Code 8. 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. CHRISTOPHER A. VORDERBURG 09/12/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00\_\_\_ 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE 10 \$100.00\_\_\_\_\_\_\_\_After MAY 1, 2001 Fee will be \$550.00.\_\_\_\_\_ 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition CHRISTOPHER A VORDERBURG MAME NAME 1202 PINEDALE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY FL 33567 CITY-ST-ZIP ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

09/12/2001

Daytime Phone #

Date

SIGNATURE: \_\_Christopher A. Vorderburg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)