

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000029022

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: KOON BROTHERS DAIRY FARM, INC.

## Current Principal Place of Business:

409 NE T.J. KOON RD.  
MAYO, FL 32066

## New Principal Place of Business:

## Current Mailing Address:

409 NE T.J. KOON RD.  
MAYO, FL 32066

## New Mailing Address:

FEI Number: 59-3434431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, TOM  
10 NO COLUMBIA ST  
LAKE CITY, FL 32055 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: KOON, CHARLES  
Address: 443 NE SANDY HILL LANE  
City-St-Zip: MAYO, FL 32066

Title: D ( ) Delete  
Name: KOON, HOWELL  
Address: P.O. BOX 207  
City-St-Zip: MAYO, FL 32066

Title: D ( ) Delete  
Name: KOON, ROBERT D  
Address: 611 N.E. CANDY LANE  
City-St-Zip: MAYO, FL 32066

Title: D ( ) Delete  
Name: KOON, SALLIE LOU  
Address: 400 NE T.J. KOON RD.  
City-St-Zip: MAYO, FL 32066

Title: D ( ) Delete  
Name: KOON, DONALD  
Address: 131 NE T.J. KOON RD.  
City-St-Zip: MAYO, FL 32066

Title: D ( ) Delete  
Name: KOON, DWYANE  
Address: 1497 NE COUNTY RD. 400  
City-St-Zip: MAYO, FL 32066

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT D. KOON

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date