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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000038398 (8)

DAIRY TECHNOLOGY, INC.

FOR tuture use-Not

ANDS OR EMPloyees AT This Fine DIA

**FILED** Jun 04 1998 8:00am Secretary of State



GAINESVILLE		5100 S W 75 STREET GAINESVILLE FL 32608			
CHINESVILLE	-7)//A Cul	world and			DO NOT WRITE IN THIS SPACE
	5040 S.W.	18 12 Way			3. Date Incorporated or Qualified
		ţ			04/28/1997
2. Principal P	lace of Business	2a. Mailing Address	0.0011	 har	4. FEI Number Applied For
21 SA M	e as above		NBOU	. <b></b>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27	· · - · · · · · · · · · · · · · · · · ·		Fee Required
City & Stat	0	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the current year Intangible
24	25   9. Name and Address of Curren		30]		Personal Property Tax due June 30. Yes No 4/4.
			81	Name	10, Hallis and Address of Non Hogistoria Again
	INLAP, HERBERT M	hange to 40 S.W. 78 W.			
	00 8 W 75 STREET	40 SW. 78 W	W 82	Street A	Address (P.O. Box Number is Not Acceptable)
GA	INESVILLE FL 32608 50	70010010	83	<del> </del>	
•			0   00		
	•		84	City	FL 85 Zip Code
(11. Pursuant	to the provinces of Sections 607.050	2 and 607 1508 Florida Statutor	e the about	o-namod	corporation submits this statement for the purpose of changing its registered
l 🛰 🛮 office or r	regi <b>ste</b> red agent, or both, in the State	of Florida. Such change was au	uthorized b	y the corp	poration's board of directors. I hereby accept the appointment as registered
agent La	m <b>fam</b> iliar with, and accept the obliga	alions of, Section 607.0505, Flor	ida Statute	S	
SIGNATURE	Signature, typed or printed man e of registered a ju	est and tille (Caratile of the MODE	Bonistered An	onl simplere	rucquired when reinstating) DATE
12.	OFFICERS AN		13.	one signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TOLLE		☐ Change ☐ Addilion
NAME	DUNLAP, HERBERT M	tra.	1.2 NAME		
STREET ADDRESS	STOOS W 78 STREET SOME	2.W.78 uty	1.3 STREE	ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32608		1.4 C(IY - 5	ST-ZIP	
TITLE	D	DELETE	2171111		Change Addition
NAME	DUNLAP, ELEANOR M	~: 18-1. L.	22 NAME		
STREET ADDRESS	6100 S W 75 STREET 5 W	OSW. 78-Why	2.3 STREET	ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32608		2 4 CITY-	ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP			3.4. CHY-	S1 - ZIP	
TITLE		☐ DELFTE	41 TITLE		Change Addition
NAME			4. 2 NAME	1	
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CHY-5	ST-ZIP	
TITLE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	ĺ	
STREET ADDRESS			53 STREET	ADDRESS	
CITY+ST-ZIP	·		5.4 CITY - 9	SI - ZIP	
TITLE	<u> </u>	☐ DELETE	6.1 TITLE	į	900025530 <b>9</b> Pange Addition -06/09/98-01074-022
NAME			62 NAME	İ	-06/09/9801074022 <b>1/.\.</b>
STREET ADDRESS			63 STREET	ADDRESS	***150.00
CITY-ST-ZIP			64 CITY-5	ST - ZIP	and a track track

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 trusted 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.