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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham 🦼

Secretary of State DIVISION OF CORPORATIONS

P97000049502 (2) DOCUMENT #

FREE-BIRD FARMS, INC.

Principal Place of Business

118 WEST ORANGE STREET

Mailing Address

118 WEST OF ANGE STORET

FILED Apr 29 1998 8:00am Secretary of State



ALTAMONTE SPRINGS FL 32714		ALTAMONTE SPRINGS FL 32714		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/05/1997
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 549°	1 Benchmark LN	26 5497 Ben	hmark L	N 59-3450097 Not Applicable
Suite, Apt.	₩, etc.	Suite. Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required
City & State	3	City & State	<u></u>	6. Election Campaign Financing \$5.00 May Be
B SAW		28 SANFORD,	+ L	Trust Fund Contribution Added to Fees
⊣ ^{Zip} ໝາລ	Country	7 ₁ p	Country	8. This corporation owes or has paid the current year intendible
24 32	773 25 USA		30 USA	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
	ERILAWYER OHARTERED		OI Name	Kichard Schmitt
A 35	ALMERIA AVENUE			Address (P.O. Box Number is Not Acceptable)
. ///	BAL GABLES FL 33134		83	197 Bench MARK HANE
=			84 City	entord FL 85 Zip Code 32773
44 5				ANTOM FL 32773
office or re	egistered age nt, or both, in the State o	if Florida. Such change was au	uthorized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	nnamilian with, and accept the obligat	ions of, Section 607.0505, Flor	ida Statutes.	•
SIGNATURE .	Signature type of or provided harms three parent agent	ed K Schmitt-SR) rres.	/-30-98
12.	OFFICERS AND		Registered Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TITLE	Change Addition
NAME	\$CHMITT, RICHARD		1.2 NAME	A
STREET ADDRESS	-118-WEST-ORANGE STREET		1.3 STREET ADDRESS	SHAT Benchmany LAN
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 827	14	1.4 CITY - ST - ZIP	5497 Benchmark Lane SANford, FL 32773
TITLE		DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	•
CITY-ST-ZIP			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. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	1
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - \$1 - ZIP	
TITLE		☐ DELĒT Ē	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I hereby c indicated	erlify that the information supplied with on this annual report or supplemental.	this filing does not qualify for	the exemption state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an
officer or o	director of the corporation or the receiv	var ar trustee empowered to ex	cecule this report as	required by Chapter 607, Florida Statutes; and that my name appears in
DIOCK 12 (or Block 13 if changed, or on an atlact		_	Vadge (100)010 11115
	11 111 161	105 005	المساء ، د	112 A 4 C C C C C C C C C C C C C C C C C C