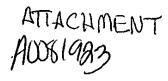
Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

Aug 20, 2001 8:00 am Secretary of State P97000067524 **DOCUMENT #** 1. Entity Name THE DECHAMPLAIN'S HEAVEN'S GATE FARM, INC. 08-20-2001 90068 028 ***150.00 Principal Place of Business Mailing Address 3239 SW COUNTY RD. 334 3239 SW COUNTY RD. 334 TRENTON FL 32693 TRENTON FL 32693 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 59-3472210 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARLEN, ROBERT M Street Address (P.O. Box Number is Not Acceptable) 1501 CORPORATE DR., STE. 200 **BOYNTON BEACH FL 33426** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition Change DECHAMPLAIN, SUZANNE NAME NAME 3239 SW COUNTY RD. 334 STREET ADDRESS STREET ADDRESS TRENTON FL 32693 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DECHAMPLAIN, MARC NAME NAME 3239 SW COUNTY RD. 334 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TRENTON FL 32693 CITY-ST-7IP TITLE TITLE Change ☐ Addition_ NAME 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 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing indicated on this report or supplemental report is true and of the corporation or the receiver or trustee empowered to not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to 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 attachm SIGNATURE:

The DeChamplain's Heavens Gate Farm 3239 SW County Road 334 Trenton, FL 32693



P97000067524

August 9, 2001

The Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Director:

We are writing in regards to the attached 2001 Business Report. We have researched our records to determine why we did not submit the original Report by its due date. We have no record of ever receiving this report in our office. If you review our payment history with your office, you will see we have never been assessed a penalty for late payment in the past. Our company pays its bills weekly and timely in all cases. We do not believe that a \$400 penalty assessment is appropriate under these circumstances.

We have, therefore, executed the 2001 Report and have enclosed a check in the amount of \$150.00 and request that the assessed penalty be waived for reasonable cause.

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Thank you for your assistance in this matter.

Sincerely.

Suzanne DeChamplain -

President

Enclosures