## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 12, 2007 08:00 AM **Secretary of State** DOCUMENT # P97000076628 1. Entity Name JAYMAR FARMS, INC. Principal Place of Business Mailing Address 8423 STATE ROAD 674 8423 STATE ROAD 674 WIMAUMA, FL 33598-6395 WIMAUMA, FL 33598-6395 No Chg-P CR2E034 (11/05) 02232007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3465581 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIZEMORE, JACK P JR. DO NOT WRITE 8602 TATUM ROAD PLANT CITY, FL 33567 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BROWN, G. MARVIN NAME STREET ADDRESS 10070 MCINTOSH RD **DOVER, FL 33527** CITY-ST-ZIP TITLE U00000662617 03/21/07-80021-009 150.00 SIZEMORE, JACK P JR. NAME STREET ADDRESS 8602 TATUM ROAD CITY-ST-ZiP PLANT CITY, FL 33567 TITEF NAME STREET ADDRESS DO NOT WRITE CiTY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Jack P. Sizemore Jr

3-2-0

813-634-8620

FILED

Daytime Phone #