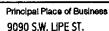
2007 FOR PROFIT CORPORATION . **ANNUAL REPORT**

DOCUMENT # P98000100913 1. Entity Name LIPE FARMS, INC. Mailing Address



FILED Apr 02, 2007 08:00 AM Secretary of State



ARCADIA, FL 34269

9090 S.W. LIPE ST. ARCADIA, FL 34269



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 03282007

4. FEI Number	Applied For
59-3545424	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

WOLF, ROBERT M P.A. 33 S.E. 4TH ST., STE. 102 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

 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_	Signature, typed or printed name of registered agent and tide #	apphoable (NOTE: Registered	Agent signature	required when reinstating);	DATE 11	1		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan- Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	्रा १९ ८०४ मा १४ वजन समित्र १९ वि	. No signify		
10.	OFFICERS AND DIRECT	TORS	<u> </u>					
TITLE	P LIPE, THOMAS B 9090 S.W. LIPE STREET ARCADIA, FL 34269	<u> </u>						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LIPE, JOHN W 9080 S.W. LIPE STREET ARCADIA, FL 34269	~ .			U60000685578 04/09/07-90611-01	1 150.0		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LIPE, PAULINE E 9080 S.W. LIPE STREET ARCADIA, FL 34269			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LIPE, JOHNNIE L 9090 S.W. LIPE STREET ARCADIA, FL 34269			ÎN ⁻	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	and the second s							
NAME STREET ADDRESS CITY-ST-ZIP-	A. Cool sidenter france de l' Coole de Branco	The second second	r- r-	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		.		
of the cor	perify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or trustee empowered, or on an attachment with an address, with all	to execute this report as requir	mptions col ure shall haved by Chap	ntained in Chapter 116 ve the same legal effector 1807, Florida Statute	Florida Statutes. I further certify that the ict as if made under oath; that I am an office is; and that my name appears in Block 10 certified.	information r or director or Block 11 if		