FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 12:04

DOCUMENT # **S20495** (5)

1. Corporation Name
RIVER RIDGE PACKING, INC.

Principal Place of Business	Mailing Address
1015 90TH STREET P. O. BOX 700 VERO BEACH FL 32961	P.O. BOX 2357 LASELLE FL 33935 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/21/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26: PO Box 700
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28: VERO BEACH FL
Zip — 24:
Country — 25:
Zip — 29: 32961-0700
Country — 30: USA

4. FEI Number: 65-0234826 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PAUL, BRYAN
2725 COUNTY RD 78A
ALVK FL 33920

10. Name and Address of New Registered Agent

81 Name: WILLIAM C. LEE
82 Street Address (P.O. Box Number is Not Acceptable): 4570 2ND STREET
83:
84 City: VERO BEACH FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: W. C. Lee — 5/15/95 — DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS for 12.	
TITLE	V	11 TITLE	☒ Change ☐ Addition
NAME	~~PAUL, BRYAN~~	12 NAME	
STREET ADDRESS	~~P.O. BOX 2274 N/A~~	13 STREET ADDRESS	NO LONGER AN OFFICER OR OWNER
CITY ST ZIP	~~LABELLE FL~~	14 CITY ST ZIP	
TITLE	PS	21 TITLE	☐ Change ☐ Addition
NAME	LEE, WILLIAM C.	22 NAME	
STREET ADDRESS	4570 2ND. ST.	23 STREET ADDRESS	
CITY ST ZIP	VERO BEACH FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	BERRY, MICHAEL F	32 NAME	
STREET ADDRESS	2145-15TH AVENUE	33 STREET ADDRESS	
CITY ST ZIP	VERO BEACH FL 32960	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	REMITTED BY MAY 1
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee 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.

SIGNATURE: W. C. Lee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date

0334863 CP