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

PROFIT **CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** May 08 1998 8:00am Secretary of State

PARRISH'S HARVESTING, INC.	(0)					
Principal Place of Business Mail	ing Address				E BIBLI BIBLI BIBL	H DIDII HOO
HEARD BRIDGE RD. HEA	1572 HEARD BRIDGE ROAD HEARD BRIDGE RD. WAUCHULA FL 33873		DO NOT WRITE IN THIS	SPACE		
<b>US</b> US				3. Date Incorporated or Qualified		
				10/31/1991		
	Mailing Address			4. FEI Number	·-··	oplied For
26 Suite, Apt. #, etc.	Suite, Apt. #, etc.			65-0290038		ot Applicable Additional
27	salta, Apr. #, ato.			5. Certificate of Status Desired	<b>4</b> • · · · ·	eguired
City & State C	City & State			6. Election Campaign Financing		May Be
28				Trust Fund Contribution		to Fees
Zip Country 2	<b>≧</b> ip	Country	'	8. This corporation owes or has paid the cu	rrent year in	tangible
24 25 29		30				] Ño
g. Name and Address of Current Register	red Agent			10. Name and Address of New Registered	Agent	
MARTIN, E. SNOW JR		81	Name			
000 LAKE MORTON DRIVE LAKELAND FL 33801	82 Street Add		Street A	Address (P.O. Box Number is Not Acceptable)		
CHICONO I C 00001		83				
11. Pursuant to the provisions of Sections 607.0502 and 607 office or registered egent, or both, in the State of Florida	1508, Florida Statut	tes, the above	City e-named o	Corporation submits this statement for the purpose operation's board of directors. I hereby accept the appropriate the second statement for the purpose of corporation's board of directors.	_   127   1	Code ts registered
11. Pursuant to the provisions of Sections 607.0502 and 607 office or registered agent, or both, in the State of Florida agent. I am familiar with, and accept the obligations of SIGNATURE  Signature, typed or provide name of registered agent and into if a		tes, the above authorized by orida Statutes	a-named of the corp	Corporation submits this statement for the purpose operation's board of directors. I hereby accept the appropriate the purpose of the purpose	_   127   1	
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 serporation or the receives 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 on or plan attar finant with any address

6.3 STREET ADDRESS

**SIGNATURE:** 

STREET ADDRESS

941-113-4868