

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # V01311 (2)

1. Corporation Name  
JACKAL FARMS OF DUCHESS COUNTY, INC.

APPROVED  
AND  
FILED

1996 MAR 15 PM 1:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
% N. SCHELP  
17 THE QUARTERDECK  
PORT WASHINGTON NY 11050  
US

Mailing Address  
% N. SCHELP  
17 THE QUARTERDECK  
PORT WASHINGTON NY 11050  
US

2. Principal Place of Business  
21 c/o Nancy L. Close  
Suite, Apt. #, etc.

2a. Mailing Address  
26 c/o Nancy L. Close  
Suite, Apt. #, etc.  
27 73 Weaver Street Unit 12  
City & State  
28 Greenwich, CT 06831-5164  
Zip  
29 06831-5164 Country  
30 US

3. Date Incorporated or Qualified  
12/19/1991  
3a. Date of Last Report  
04/28/1995  
4. FEI Number  
58-1977097  
Applied For  
Not Applicable  
5. Certificate of Status Desired  
XX \$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution  
\$5.00 May Be  
Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes  
X Yes ☐ No

22 73 Weaver Street Unit 12  
City & State  
23 Greenwich, CT 06831-5164  
Zip  
24 06831-5164 Country  
25 US

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City & State  
28 Greenwich, CT 06831-5164  
Zip  
29 06831-5164 Country  
30 US

9. Name and Address of Current Registered Agent

LUBRANO, ANDREW J.  
101 E. KENNEDY BLVD.  
SUITE 3700 - BARNETT PLAZA  
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name  
CT Corporation System  
82 Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road  
83  
84 City  
Plantation FL 85 Zip Code  
33324

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Connie Bryan* *Connie Bryan* *Special Asst. Secretary*  
Special Assistant Secretary (Not a Registered Agent Signature) (When Resigning)

DATE 3-15-96

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS  
X DELETE  
1.1 TITLE  
PS  
1.2 NAME  
NANCY SCHELP  
1.3 STREET ADDRESS  
17 THE QUARTER DECK  
1.4 CITY - ST - ZIP  
PT WASHINGTON NY  
☐ DELETE  
2.1 TITLE  
☐ DELETE  
2.2 NAME  
☐ DELETE  
2.3 STREET ADDRESS  
☐ DELETE  
2.4 CITY - ST - ZIP  
☐ DELETE  
3.1 TITLE  
☐ DELETE  
3.2 NAME  
☐ DELETE  
3.3 STREET ADDRESS  
☐ DELETE  
3.4 CITY - ST - ZIP  
☐ DELETE  
4.1 TITLE  
☐ DELETE  
4.2 NAME  
☐ DELETE  
4.3 STREET ADDRESS  
☐ DELETE  
4.4 CITY - ST - ZIP  
☐ DELETE  
5.1 TITLE  
☐ DELETE  
5.2 NAME  
☐ DELETE  
5.3 STREET ADDRESS  
☐ DELETE  
5.4 CITY - ST - ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
XX Change ☐ Addition  
1.1 TITLE  
President  
1.2 NAME  
Nancy L. Close  
1.3 STREET ADDRESS  
73 Weaver St. Unit 12  
1.4 CITY - ST - ZIP  
Greenwich, CT 06831-5164  
☐ Change ☒ Addition  
2.1 TITLE  
Secretary  
2.2 NAME  
Michael J. Close  
2.3 STREET ADDRESS  
73 Weaver St. Unit 12  
2.4 CITY - ST - ZIP  
Greenwich, CT 06831-5164  
☐ Change ☐ Addition  
3.1 TITLE  
600001745086  
3.2 NAME  
03/15/96 - 01096 - 011  
3.3 STREET ADDRESS  
\*\*\*\*208.75 \*\*\*\*208.75  
3.4 CITY - ST - ZIP  
☐ Change ☐ Addition  
4.1 TITLE  
☐ Change ☐ Addition  
4.2 NAME  
☐ Change ☐ Addition  
4.3 STREET ADDRESS  
☐ Change ☐ Addition  
4.4 CITY - ST - ZIP  
☐ Change ☐ Addition  
5.1 TITLE  
☐ Change ☐ Addition  
5.2 NAME  
☐ Change ☐ Addition  
5.3 STREET ADDRESS  
☐ Change ☐ Addition  
5.4 CITY - ST - ZIP  
☐ Change ☐ Addition  
6.1 TITLE  
☐ Change ☐ Addition  
6.2 NAME  
☐ Change ☐ Addition  
6.3 STREET ADDRESS  
☐ Change ☐ Addition  
6.4 CITY - ST - ZIP  
☐ Change ☐ Addition

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: *Nancy L. Close* Nancy L. Close, President 3/8/96 (203) 661 7371  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)