

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752670

Entity Name: ARAPAHOE FARMS, INC.**Current Principal Place of Business:**8751 W. BROWARD BLVD.
SUITE 400
PLANTATION, FL 33324**Current Mailing Address:**P.O. BOX 19439
PLANTATION, FL 33318 US**FEI Number:** 59-2191475**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALANCY & REED, P.A.
310 SE 13TH STREET
FORT LAUDERDALE, FL 33316 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, TREASURER
Name CORNBLATT, GAIL
Address 3330 SW 59 ST
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name UNGAR, MIRIAM
Address 5810 SW 33 TER
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR, VP
Name COPLOWITZ, BARBARA
Address 5901 SW 33 LANE
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name KRANT, ELIZABETH
Address 5821 SW 33 TERRACE
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name ZORMAN, GREG
Address 5730 SW 33 TER
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR, SECRETARY
Name GLASER, MELISSA
Address 5911 SW 33 TER
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR, PRESIDENT
Name LEGUM, JOSHUA
Address 3350 SW 58 ST
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR
Name LUSTMAN, CRAIG
Address 3320 SW 58 ST
City-State-Zip: HOLLYWOOD FL 33312

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEGUM , JOSHUA**PRESIDENT****02/26/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FEIN, SETH
Address	3340 SW 59 ST
City-State-Zip:	HOLLYWOOD FL 33312