

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 337958

Entity Name: HOMESTEAD POLE BEAN COOPERATIVE, INC.**Current Principal Place of Business:**26000 SOUTH FEDERAL HWY
HOMESTEAD, FL 33032**Current Mailing Address:**PO BOX 322248
HOMESTEAD, FL 33032-1548 US**FEI Number: 59-1234713****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOREK, THOMAS
26000 S. DIXIE HIGHWAY
HOMESTEAD, FL 33032 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	VP
Name	BOREK, RICHARD
Address	11490 SW 238 TERR
City-State-Zip:	PRINCETON FL 33032

Title	DIRECTOR
Name	DUNAGAN, LARRY
Address	14975 SW 232ND ST
City-State-Zip:	GOULDS FL 33170

Title	TREASURER
Name	BOREK, JOSEPH E JR.
Address	600 N.E. 14TH ST.
City-State-Zip:	HOMESTEAD FL

Title	SECRETARY
Name	FISHMAN, YALE
Address	13661 DEERING BAY DRIVE
City-State-Zip:	MIAMI FL 33158

Title	DIRECTOR
Name	HEDIGER, WAYNE
Address	24155 S.W. 152ND AVENUE
City-State-Zip:	HOMESTEAD FL 33187

Title	PRESIDENT
Name	BOREK, THOMAS
Address	25405 SW 182 AVE
City-State-Zip:	HOMESTEAD FL 33032

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS BOREK**PRESIDENT****01/10/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date