

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000062973

**Entity Name:** MCLEAN FAMILY FARMS, INC.

**Current Principal Place of Business:**

1645 E HWY 50  
SUITE 202  
CLERMONT, FL 34711

**Current Mailing Address:**

PO BOX 1201  
MINNEOLA, FL 34755 US

**FEI Number:** 26-2917982

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOWELL, ALEXANDER M  
1645 E HWY 50  
SUITE 202  
CLERMONT, FL 34711 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 PD  
Name MCLEAN, WILLIAM BIII  
Address 1645 E HWY 50, SUITE 202  
City-State-Zip: CLERMONT FL 34711

Title VPTD  
Name HOWELL, ALEXANDER M  
Address 1645 E HWY 50, SUITE 202  
City-State-Zip: CLERMONT FL 34711

Title SD  
Name MCLEAN, MATTHEW C  
Address 1645 E HWY 50, SUITE 202  
City-State-Zip: CLERMONT FL 34711

Title D  
Name MCLEAN, WILLIAM BJR.,  
Address 1645 E. HWY 50, SUITE 202  
City-State-Zip: CLERMONT FL 34711

*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:** WILLIAM B MCLEAN III

**PRESIDENT**

**03/12/2018**

Electronic Signature of Signing Officer/Director Detail

Date