

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S68908

**Entity Name:** ASTIN FARMS, INC.

**Current Principal Place of Business:**

107 HOLLOWAY RD  
PLANT CITY, FL 33567

**Current Mailing Address:**

PO BOX 3837  
PLANT CITY, FL 33563

**FEI Number:** 65-0278097

**Certificate of Status Desired:** No

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

GARDNER, J. STEPHEN  
101 S. FRANKLIN STREET, SUITE 101  
TAMPA, FL 33602 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 P  
Name ASTIN, SAM, III  
Address 4408 MUDLAKE RD  
City-State-Zip: PLANT CITY FL 33567

Title VP  
Name ASTIN, SAM III  
Address 4408 MUDLAKE RD  
City-State-Zip: PLANT CITY FL 33567

Title ST  
Name ASTIN, BUFFY  
Address 4408 MUDLAKE RD  
City-State-Zip: PLANT CITY FL 33567

*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:** SAM ASTIN III

**PRESIDENT**

**01/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date