

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

INCORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAR - 1 PH 4: 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 292015 (5)
THE LBEUNA FARMS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
115 SOUTH FIFTH STREET MACCLENNY FL 32063		115 SOUTH FIFTH STREET MACCLENNY FL 32063		04/16/1965		04/05/1994	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-1091874		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 City & State		27 City & State		6. Election Campaign Financing		\$5.00 May Be Added to Fees	
24 Zip		29 Zip		Trust Fund Contribution		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
25 Country		30 Country		Yes <input type="checkbox"/> No <input type="checkbox"/>			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
YARBOROUGH, BERNICE K. 115 S FIFTH ST MACCLENNY FL 32063				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	PD KNABB, GEORGE W	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS	117 SO 5 STR	1.2 NAME	
12.3 CITY - ST - ZIP	MACCLENNY FL	1.3 STREET ADDRESS	
12.4 CITY - ST - ZIP		1.4 CITY - ST - ZIP	
12.5 NAME	VD KNABB, JAMES W., JR.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 STREET ADDRESS	RT. 2, BOX 729	2.2 NAME	
12.7 CITY - ST - ZIP	MACCLENNY FL	2.3 STREET ADDRESS	
12.8 CITY - ST - ZIP		2.4 CITY - ST - ZIP	
12.9 NAME	STD YARBOROUGH, BERNICE K	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 STREET ADDRESS	115 S. 5TH ST.	3.2 NAME	
12.11 CITY - ST - ZIP	MACCLENNY FL	3.3 STREET ADDRESS	
12.12 CITY - ST - ZIP		3.4 CITY - ST - ZIP	
12.13 NAME	CD KNABB, WILLIAM M	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 STREET ADDRESS	115 S 5TH ST	4.2 NAME	
12.15 CITY - ST - ZIP	MACCLENNY FL	4.3 STREET ADDRESS	
12.16 CITY - ST - ZIP		4.4 CITY - ST - ZIP	
12.17 NAME		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 STREET ADDRESS		5.2 NAME	
12.19 CITY - ST - ZIP		5.3 STREET ADDRESS	
12.20 CITY - ST - ZIP		5.4 CITY - ST - ZIP	
12.21 NAME		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 STREET ADDRESS		6.2 NAME	
12.23 CITY - ST - ZIP		6.3 STREET ADDRESS	
12.24 CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 included in 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 of Block 13 of this report, or my attachment with an addition.

SIGNATURE: *Bernice K. Yarbrough* DATE: 2-21-95
 SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR, OFFICER OR DIRECTOR 904-259-3204