

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 292015

FILED
Mar 09, 2017
Secretary of State
CC6648255165

Entity Name: THE LABEUNA FARMS, INC.

Current Principal Place of Business:

115 SOUTH FIFTH STREET
MACCLENNY, FL 32063

Current Mailing Address:

115 SOUTH FIFTH STREET
MACCLENNY, FL 32063

FEI Number: 59-1091874

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORMAN, DIANE K
115 S 5TH ST
MACCLENNY, FL 32063 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: DIANE K. DORMAN

03/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name KNABB, JR., JAMES W
Address 115 SOUTH 5TH ST.
City-State-Zip: MACCLENNY FL 32063

Title VPD
Name KNABB, WILLIAM W
Address 115 S 5TH ST
City-State-Zip: MACCLENNY FL 32063

Title S
Name DORMAN, DIANE K
Address 115 S. 5TH ST.
City-State-Zip: MACCLENNY FL 32063

Title TD
Name MCCULLOUGH, CAROLYN
Address 115 S 5TH ST
City-State-Zip: MACCLENNY FL 32063

Title D
Name YARBOROUGH, GLENN
Address 115 S 5TH ST
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR
Name THORNTON, JOE A
Address 115 SOUTH FIFTH STREET
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR
Name DORMAN, DIANE K
Address 115 SOUTH FIFTH STREET
City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR
Name RHODEN, JANE D
Address 115 SOUTH FIFTH STREET
City-State-Zip: MACCLENNY FL 32063

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

SIGNATURE: DIANE K. DORMAN

SECRETARY

03/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCCAULEY, GWENDOLYN K
Address 115 SOUTH FIFTH STREET
City-State-Zip: MACCLENNY FL 32063

Title ASSISTANT SECRETARY
Name FLETCHER, LAVETTA DANIELLE
Address 115 SOUTH FIFTH STREET
City-State-Zip: MACCLENNY FL 32063