

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000079437

**Entity Name:** OAKMONT FARMS OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

804 FAULKNER ST  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

PO BOX 2570  
NEW SMYRNA BEACH, FL 32170-2570 US

**FEI Number:** 20-2950520

**Certificate of Status Desired:** No

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

ROBBINS, MARTIN  
804 FAULKNER STREET  
NEW SMYRNA BEACH, FL 32168 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 PS  
Name ROBBINS, MARTIN  
Address 804 FAULKNER STREET  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VT  
Name ROBBINS, TINA  
Address 804 FAULKNER STREET  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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:** TINA ROBBINS

VP

03/04/2013

Electronic Signature of Signing Officer/Director Detail

Date