

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000013643

**Entity Name:** CACERES ORGANIC FARMS, INC.

**Current Principal Place of Business:**

7944 NE HIGHWAY 349  
OLD TOWN, FL 32680

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC0475346098**

**Current Mailing Address:**

7944 NE HIGHWAY 349  
OLD TOWN, FL 32680 US

**FEI Number: 83-0508173**

**Certificate of Status Desired: No**

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

CACERES, RICHARD  
7944 NE HIGHWAY 349  
OLD TOWN, FL 32680 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	PVST	Title	D
Name	CACERES, RICHARD	Name	CACERES, RICHARD
Address	7944 NE HIGHWAY 349	Address	7944 NE HIGHWAY 349
City-State-Zip:	OLD TOWN FL 32680	City-State-Zip:	OLD TOWN FL 32680

*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: RICHARD CACERES**

**PRESIDENT**

**04/23/2014**

Electronic Signature of Signing Officer/Director Detail

Date