## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 06 1997 8:00am

Secretary of State

2-26-97 941 642-4888

CR2E034

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S03972

(4)

JUSTA FARM CORP. Principal Place of Business Mailing Address 870 S. COLLIER BLVD 870 S. COLLIER BLVD LES FALLS PHB LES FALLS PHB MARCO ISLAND FL 34145-6100 MARCO ISLAND FL 33937 3. Date Incorporated or Qualified 3a. Date of Last Report 10/04/1990 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0225806 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS ST. Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 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 for 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typical or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE THE BLACKWELL, JOHN W. 1.2 NAME NAME 870 S. COLLIER BLVD. STREET ADDRESS 1.3 STREET ADDRESS MARCO ISLAND FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE BLACKWELL, KAREN A. 2.2 NAME NAME 870 S. COLLIER BLVD. 2.3 STREET ADDRESS STREET ADDRESS MARCO ISLAND FL 2. 4 CITY-ST-ZIP CITY - ST- ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP C(TY - ST - 7)P Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition 5 1 TITLE 52 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CiTY - ST-ZIP CITY-ST-ZIP DELETE Change Addition THEE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

information indicated on the ansual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or tropleceiver or busice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name