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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 276823

1. Corporation Name
CUSHMAN FRUIT COMPANY INC

Principal Place of Business	Mailing Address
% E. A. CUSHMAN. JR. 3325 FOREST HILL BLVD. WEST PALM BEACH FL 33406	% E. A. CUSHMAN. JR. 3325 FOREST HILL BLVD. WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 10/01/1964

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24) Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29) Country (30)

4. FEI Number: 59-1059491 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CUSHMAN JR,E A
3325 FOREST HILL BLVD
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	☐ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	CUSHMAN, MD		1.2 NAME	DEBORAH BENNETT	
STREET ADDRESS	3325 FOREST HILL BLVD		1.3 STREET ADDRESS	3325 FOREST HILL BLVD.	
CITY-ST-ZIP	W PALM BCH, FL 00000		1.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CUSHMAN, ANNE S		2.2 NAME		
STREET ADDRESS	3325 FOREST HILL BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH, FL 00000		2. 4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CRAWFORD, K		3.2 NAME		
STREET ADDRESS	3325 FOREST HILL BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH, FL 00000		3.4. CITY-ST-ZIP		
TITLE	STD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CUSHMAN, J S		4. 2 NAME		
STREET ADDRESS	3325 FOREST HILL BLVD		4.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH, FL 00000		4.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	CUSHMAN, E A, JR		5.2 NAME		
STREET ADDRESS	3325 FOREST HILL BLVD		5.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH, FL 00000		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CUSHMAN, ANNE F.		6.2 NAME		
STREET ADDRESS	1207 MAPLE STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA SC		6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. I 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 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; 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathleen L Crawford Jan 22 '99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #