## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 30, 2001 8:00 am Secretary of State DOCUMENT # 276823 **CUSHMAN FRUIT COMPANY INC** 04-30-2001 90042 033 \*\*\*150.00 Principal Place of Business Mailing Address % E. A. CUSHMAN, JR. % E. A. CUSHMAN, JR. 3325 FOREST HILL BLVD. 3325 FOREST HILL BLVD. WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1059491 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CUSHMAN JR,E A Street Address (P.O. Box Number is Not Acceptable) 3325 FOREST HILL BLVD WEST PALM BEACH FL 33406 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulact when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Dapartment of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CD TITLE ☐ Delete TITLE CUSHMAN, MD NAME NAME 3325 FOREST HILL BLVD STREET ACCRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33406 CITY-ST-ZIP Addition TITLE ☐ Delete TITLE CUSHMAN, ANNE S NAME NAME 3325 FOREST HILL BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33406 ☐ Change Addition TITLE ☐ Delete TITLE CRAWFORD, K NAME NAME STREET ADDRESS 3325 FOREST HILL BLVD STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33406 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Acdition TITLE CUSHMAN, J S NAME NAME 3325 FOREST HILL BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33406 Delete TITLE Change Addition TITLE CUSHMAN, E.A. JR NAME NAME STREET ADDRESS 3325 FOREST HILL BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33406 Change Acdition TITLE ☐ Delete TITLE CUSHMAN, ANN F. NAME STREET ADDRESS 1207 MAPLE STREET STREET ADDRESS COLUMBIA SC CITY-ST-ZiP 13. 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 report or supplemental 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, Fiorida Statutes; and that my name appears in Block 11 or Block 12 if

4-20-01