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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARIMENT OF STATE

Katherir e Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90069 014 ***150.00

DOCUMENT	#	525923
Corporation Name		02020

VERO PRODUCERS, INC.

7355 SW 9TH STREE VERO BCH FL 32968 2. Principal Place of	ET				1
2. Principal Place		7355 SW 9TH STREET			
2. Principal Place	VERO BCH FL 32968 VERO BCH FL 32968		DO NOT WRITE IN THIS SPACE		
 7 .	VERO BOH FL 32900				Date Incorporated or Qualifed
 7 .					02/15/1977
 7 .	of Business	2a. Mailing Address			4. FE) Number Applied For
	0, 000,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	26			59-1720357 Not / pplicable
Suite, Ap . #, etc	tc.	Suite, Apt. #, etc.			_ \$8.75 Additional
22		27			5. Certifca e of Status Desired
City & Strate		City & State			6. Election Campaign Financing S5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Count y	Zip	Count		8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	. Name and Address of Curren	_ +	<u> </u>		10. Name and Address of New Registered Agent
			8	1 Nam	me
HAMNER	r, george f., Jr.		Ļ		(20.2.4)
7355 SW 9TH STREET		2 Stree	eet Address (P.O. Box Number is Not Acceptable)		
VERO BE	EACH FL 32968		8	3	
			<u> </u> _		
	•		8	4 City	y F.L 85 Zip Code
44	507.050	D and CO7 4ED9 Florida Statuta	- the abo	V6 2200	ned co poration submits this statement for the purpose of changing its registered
office o registr	tered agent, or both, in the State (o Florida. Such change was ει	ithorized b	v the co	corporation's board of directors. I hereby accept the appointment as registered
agent. I am far	amiliar with, and accept the obligat	tions of, Section 607.0505, Flcr	ida Statute	S.	
SIGNATURE					
	ature, typed or printed nar ie of registered agen	_ 		ent signatu	ture required when reinstatung) OATE ADDITIONS (CHANGES TO DESIGNED WILL DIRECTOR S IN 12)
12.	. 	C DIRECTORS	13.	_	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF S IN 12
TITLE D		☐ DELETE	1.1 TITLE		
	AMNER, A.G.		1.2 NAME	•	
	50 \$. A-1-A		13 STRE	ET ADDRES	RESS
CITY-ST-ZIP VE	ERO BEACH FL		1.4 CITY	ST-ZIP	
TITLE CS	SD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME HA	amner, george f.		2.2 NAME		
STREET ADDRESS 656	50 Ş. A-1-A		2.3 STREET ADDRESS		RESS
-CITY-ST-ZIP	RO BEACH FL		- '2:4 CITY	-ST-ZIP	
TITLE PT	TD .	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME HA	AMNER, GEORGE F., JR.		3.2 NAME		
I	5 SANDFLY LANE		3 3 STRE	ET ADDRES	RESS
	ERO BEACH FL		3.4. CITY	-ST-ZIP	
CITY, ST. ZIP		☐ DELETE	4.1 TITLE		Change Addition
		_	4. 2 NAM		\
TITLE D	UKIRININIH				
TITLE D NAME GO	ORDON, N. H. Ps live oak lane		43 STRE	ET ADDRE	RESS
NAME GO STREET ADDRI SS 72	25 LIVE OAK LANE			ET ADDRES	RESS
NAME GC STREET ADDRI SS 72! CITY-ST-ZIP VE		☐ DELETE	4.4 CITY	ST-ZIP	
TITLE D NAME GC STREET ADDRI SS 721 CITY ST - ZIP TITLE	25 LIVE OAK LANE	☐ DELETE		-ST-ZIP	RESS Change Addition
TITLE D NAME GC STREET ADDRI SS 723 CITY- ST-ZIP VE TITLE NAME	25 LIVE OAK LANE	☐ DELETE	5.1 TITLE 5.2 NAMI	-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME GC STREET ADDRI SS 72: CITY- ST-ZIP VE TITLE NAME STREET ADDR :SS	25 LIVE OAK LANE	☐ DELETE	5.1 TITLE 5.2 NAMI 5.3 STRE	ST-ZIP : : ET ADORES	☐ Change ☐ Addition
TITLE D NAME GC STREET ADDRI .SS 72.2 CITY. STZIP VE TITLE NAME STREET ADDR :SS CITY. STZIP	25 LIVE OAK LANE		4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY	-ST-ZIP : : : : : : : : : : : : : : :	Change Addition
TITLE D NAME GC STREET ADDRI SS 72: CITY- ST-ZIP VE TITLE NAME STREET ADDR :SS	25 LIVE OAK LANE	☐ DELETE	4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY 6.1 TITLE	ST-ZIP	☐ Change ☐ Addition
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TITLE D NAME GC STREET ADDRI :SS 72: CITY- ST-ZIP VE TITLE NAME STREET ADDR :SS CITY- ST-ZIP TITLE	25 LIVE OAK LANE		5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CITY 6.1 TITLE 6.2 NAM	ST-ZIP	Change Addition

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 ar officer or director of the corporation or the receiver or trustee empowered to execute this report as if quired by Chap er 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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George F. Hamner, Jr.

4/26/99 (561)562-2500

Date

Daytime Phone #