## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

633355

(3)

RIDGE (	CITRUS CORPORATION								
Principal Place of Business Mailing Address								<b>4.0.1.0.1.1.</b>	1211 21211 1221
1304 MIRROR TERRACE, N.W. 1304 MIRROR TERRACE, N.W. WINTER HAVEN FL 33881 WINTER HAVEN FL 33881									
						3. Date Incorporated or Qualified 08/21/1979		of Last Re /19/199	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number Applied For				
21		26			59-1934008			Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution      "	\$5.00 May Be Added to Fees			
Zip	Country Zip			ıntry		8. This corporation has liability for it		x under s	199.032,
24	25 29					Florida Statutes Yes No			
Name and Address of Current Registered Agent				D4	Ala-a-	10. Name and Address of New R	egisterea /	tgent	
MADOTTI	CAROL C			81	Name				
MAROTTI, CAROL C. 1304 MIRROR TERRACE N.W.				82	Street Add	ss (P.O. Box Number is Not Acceptable)			
	HAVEN FL								
				84	City		FL	85 Zıçı	Code
or registere familiar with SIGNATURE	d agent, or both, in the State of Florice n, and accept the obligations of, Section	a. Such change was authorize n 607.0505, Florida Statutes.	a by the	corp	oration s boa	ration submits this statement for the pur ard of directors. I hereby accept the appo	pose of cha pintment as	inging its re registered	agent. I am
12.	signature typed or critical name of registered agent and title if applicable NOTE: Registere  OFFICERS AND DIRECTORS  13.				a digital and respons	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
DILE	PD	DELETE	1.1	TITLE				Chançe	☐ Addition
NAME	Marotti, Lewis e		1.2 NAME		ļ				
STREET ADDRESS	1304 MIRROR TERRACE N.W.		1.3 STREET ADD		ADDRESS				1
CITY - ST - ZIP	WINTER HAVEN, FL 00000		1.4 CHTY-ST-ZIP		it-zie				
TITLE	DST DELETE		2.1	TITLE			ι	Change	☐ Add-tion
NAME	MAROTTI, CAROL C		2 2 NAME						
STREET ADDRESS	1304 MIRROR TERRACE N.W.		2 3 STREET						
CITY-ST-ZIP	WINTER HAVEN, FL 00000	☐ DELETE	2.4 CITY - ST 3. 1 TITLE		ST-ZIP		, г	Change	Addition
TITLE				3.2 NAME		.2	-		المستورد ال
NAME					T ADDRESS	)			
STREET ADDRESS					ST-ZIP				
CHY-ST-ZIP TITLE		DELETE		TITLE	,, Fi,			Change	Addition
NAME		_	4.21	NAME					
STREET ADDRESS			4.3 \$	STREE"	I ADDRESS				
DITY-ST-ZIP			4.4 CITY		ST-ZIP				
TITLE		☐ DELETE	5. 1 TITL				[	Change	Addition
NAME			5.2 NAM						
STREET ADDRESS			5.3 5	5.3 STREET ADDRESS					
CITY-ST-ZIP				5.4 CiTY-ST-ZIP			· · · · · ·		C) Addition
TITLE		☐ DEFELE	6 1 TITLE				l	Change	Addition
NAME				NAME					ļ
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	andia that the information appointed of	ith this filing is voluntarily furn			ST-ZIP	for the exemption stated in Section 119	.07(3)(k), Fid	orida Statu	tes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 certify 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayling F1 One 1

CR2E034 (12/95)