

FILE NOW: FILING FEE IS \$61.25

FILED  
May 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 790894 (0)**

1. Corporation Name  
**CALAVO GROWERS OF CALIFORNIA**



Principal Place of Business <b>2530 RED HILL AVENUE SANTA ANA CA 92705-5542</b>	Mailing Address <b>2530 RED HILL AVENUE P.O. Box 26081 SANTA ANA CA 92705-5542 92799-6081</b>
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3. Date Incorporated or Qualified <b>11/04/1964</b>	4. FEI Number <b>95-0591900</b>	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>28</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name <b>800002514678</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>05707-98-01010-037 ***61.25</b>
83
84 City <b>FL</b>
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>VP</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>SR. VICE PRESIDENT OPERATIONS</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>REDMAN, CHARLES A</b>		1.2 NAME <b>HETTERYK, ERWIN</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		1.3 STREET ADDRESS <b>2530 RED HILL AVENUE</b>	
CITY-ST-ZIP <b>JUSTIN CA</b>		1.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	
TITLE <b>T</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>2530 RED HILL AVENUE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RUNGE, SCOTT H</b>		2.2 NAME <b>SANTA ANA, CA. 92705-5542</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		2.3 STREET ADDRESS <b>2530 RED HILL AVENUE</b>	
CITY-ST-ZIP <b>JUSTIN CA</b>		2.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	
TITLE <b>VPS</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>2530 RED HILL AVENUE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>CARBONE, EGIDIO</b>		3.2 NAME <b>SANTA ANA, CA. 92705-5542</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		3.3 STREET ADDRESS <b>2530 RED HILL AVENUE</b>	
CITY-ST-ZIP <b>JUSTIN CA</b>		3.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	
TITLE <b>AT</b>	<input type="checkbox"/> DELETE	4.1 TITLE <b>2530 RED HILL AVENUE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>FREIMUND, JERRY</b>		4.2 NAME <b>SANTA ANA, CA. 92705-5542</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		4.3 STREET ADDRESS <b>2530 RED HILL AVENUE</b>	
CITY-ST-ZIP <b>JUSTIN CA</b>		4.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	5.1 TITLE <b>DIRECTOR, CHIEF EXECUTIVE OFFICER</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>COLE, LECIL E</b>		5.2 NAME <b>2530 RED HILL AVENUE</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		5.3 STREET ADDRESS <b>SANTA ANA, CA. 92705-5542</b>	
CITY-ST-ZIP <b>JUSTIN CA 92000-7321</b>		5.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	
TITLE <b>PCE</b>	<input checked="" type="checkbox"/> DELETE	6.1 TITLE <b>PRESIDENT</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>VANGELOS, ALLEN</b>		6.2 NAME <b>BENNETT, RONALD G.</b>	
STREET ADDRESS <b>15061 RED HILL AVENUE</b>		6.3 STREET ADDRESS <b>2530 RED HILL AVENUE</b>	
CITY-ST-ZIP <b>JUSTIN CA</b>		6.4 CITY-ST-ZIP <b>SANTA ANA, CA. 92705-5542</b>	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Handwritten Signatures]* 4/20/98 (949)223-7111

CFR2037 (10/97)