FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
95 MAY 22 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F06600** **(3)**

1. Corporation Name

RIVERFRONT CITRUS MANAGEMENT, INC.

Principal Place of Business	Mailing Address
4889 N US HWY 1 940 OYSTER SHELL LN VERO BEACH FL 32960 US	POST OFFICE BOX 6490 POST OFFICE BOX 6490 VERO BEACH FL 32961 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/24/1980**
3a. Date of Last Report: **04/21/1994**

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. # or Rt. (22) / Suite, Apt. # or Rt. (27)
City & State (23) / City & State (28)
Zip (24) / County (25) / Zip (29) / County (30)

4. FEI Number: **59-2043778** — Applied For ☐ Not Applicable ☐

5. Certificate 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 has liability for intangible tax under S. [illegible] Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

O'HAIRE, MICHAEL
3111 CARDINAL DR.
VERO BEACH FL 32963

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 Section 607.0501 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: [illegible]

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
1. TITLE	PST	President, Secretary, Treasurer ☐ Change ☐ Addition
1. NAME	KNIGHT, D. VICTOR JR.	D. Victor Knight JR.
1. STREET ADDRESS	940 OYSTER SHELL LANE	940 Oyster Shell Lane
1. CITY, ST, ZIP	VERO BCH, FL 00000	Vero Beach, Fla. 32961
2. TITLE	~~VP~~	☐ Change ☐ Addition
2. NAME	CROSBY, LAMAR	
2. STREET ADDRESS	4889 N. U.S. HWY. 1	
2. CITY, ST, ZIP	VERO BCH, FL 00000	
3. TITLE	~~ST~~	☐ Change ☐ Addition
3. NAME	YARINA, GLORIA	
3. STREET ADDRESS	4889 N. U.S. HWY. 1	
3. CITY, ST, ZIP	VERO BEACH FL	
4. TITLE		☐ Change ☐ Addition
4. NAME		
4. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		☐ Change ☐ Addition
5. NAME		
5. STREET ADDRESS		
5. CITY, ST, ZIP		
6. TITLE		☐ Change ☐ Addition
6. NAME		
6. STREET ADDRESS		
6. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 with an address.

SIGNATURE: [signature] D. Victor Knight, JR. 4/3/95 407-231-6422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0421598 FP