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

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(1)

FILED Jan 22 1998 8:00am Secretary of State

CIRCLE	E H CITRUS, INC.								
Principal Plac		Mailing Address		·	·	1 10011000 1111 12017 10017 00183 11017 11 0	. 	4011 BIBII BIA)
1180 SHINN RD. PO BOX 14049 FT PIERCE FL 34945 FT PIERCE FL 34979						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 04/20/1982			
2. Principal Place of Business 21 3500 SHINN RD. 26 Mailing Address						4. FEI Number 59-2226225			pplied For lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27						5. Certificate of Status Desired		\$8.75	Additional equired
City & State 23 City & State 28						Election Campaign Financing Trust Fund Contribution			May Be to Fees
24 349 1	Country 25	Zip 29	Count	ry		This corporation owes or has pai Personal Property Tax due June	30.	Yes [itangible No
DA	 Name and Address of Currer NTUSO, GEORGE T 	it Hegistered Agent	- 8	1 Name		10. Name and Address of New Rec	jistered A	gent	
	15 S INDIAN RIVER DR		ا	INAME	;				
	PIERCE FL 34982		8	2 Street	Addres	s (P.O. Box Number is Not Acceptable	le)		
			B	3					
			8	4 City			FL	85 Zip	Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was aul agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida. 				ve-named	d corpor	ation submits this statement for the pu	urnose of c	hanging i	ts registered
office or re agent. I a	ogistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 607.0505, Flo	aulhorized l orida Statut	by the cores.	rporation	's board of directors. I hereby accep	t the appoi	ntment as	registered
SIGNATURE									
12.				gent signatur	e required (whori resistating)	DATE		
TITLE	PS0	DELETE	13. 11 THEF		₁	ADDITIONS/CHANGES TO OFFICE		Change	Addition
NAME	PANTUSO, GEORGE T.	Lan Decemb	1.2 NAME				L.	_1 Change	Magadini
STREET ADDRESS	3415 S. INDIAN RIVER DR			- Et address]}
CITY-ST-ZIP	FT PIERCE FL		1.4 CITY		1				
TATLE	M	DELETE	2.1 TITLE	21-21F	М			Change	Addition
NAME	DAUGHTREY, MARVIN R.		2.2 NAME		∐"Μ.	ARVIN DAUGHTRE	:∨ "		L Addition
STREET ADDRESS	2295 COOLIDGE RD.			T ADDRESS		ARVIN DAUGHTRE	"/ N.		ŀ
CITY-ST-ZIP	FT. PIERCE FL		2. 4 City		F	TPIERCE F	1 .	240	3115
TITLE	V	☐ DELETE	3.1 TITLE		i i			Change	Addition
NAME	PANTUSO, SUSAN D		3.2 NAME				_		
STREET ADDRESS	3415 S. INDIAN RIVER DR.		3.3 STREE	1 ADDRESS					
CITY-ST-ZIP	FT. PIERCE FL		3.4. CITY-	ST-ZIP					
TITLE		DELETE	4.1 TITLE		İ	··· • • • • • • • • • • • • • • • • • •	Ε	Change	Addition
NAME			4.2 NAMI		ł			_	
STREET ADDRESS			4.3 STREE	T ADDRESS	1				
CITY-ST-ZIP			4.4 CiTY-	ST-ZIP					
TITLE		DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS	1				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	[
TITLE		☐ DELETE	6.1 TITLE			***************************************		Change	Addition
NAME			62 NAME	İ	1				
STREET ADDRESS			6.3 STREE	T ADDRESS					
CITY-ST-ZIP			6.4 CITY-	ST-ZIP					
14. Thereby ce	ertify that the information supplied will	th this filing does not qualify fo			od in Soc	tion 119 07/31(i) Florida Statutos I fu	idhar aarti	u that the	information

I nereby 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 nustee 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.