2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State DOCUMENT # P01000042931 03-03-2004 90024 026 ***150.00 DIVERSIFIED CITRUS MARKETING, INC. Principal Place of Business Mailing Address PO BOX 658 300 STATE ROAD 17 SOUTH LAKE HAMILTON, FL 33851 LAKE HAMILTON, FL 33851 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02102004 Cha-P CR2E034 (10/03) 4. FEI Number Applied For City & State City & State 59-3724134 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHAAL, MARY Street Address (P.O. Box Number is Not Acceptable) 112 WALDEMAR CT SE WINTER HAVEN, FL 33884 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Mary Schaal Many Made Signature, typed or printed name of registered agent and title if applicable. 2-27-04 SIGNATURE (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Director Sect Treas Change Delete TITLE TITLE Charles Watson BROADAWAY, DENNIS P NAME NAME 9400 W. Lake Ruby STREET ADDRESS 2050 WEST LAKE HAMILTON DR. STREET ADDRESS 33884 WINTER HAVEN, FL 33881 CITY-ST-ZIP Winter Haven FL City-St-ZiP Addition Delete Director Change Steven B. Callaham TITLE DUNNAHOE, FRANK D NAME NAME 2823 Seguoyah Dr. 805 LAKE ELBERT COURT NE STREET ADDRESS STREET ADDRESS Haines City, FL 33844 Asst. Sec-Treas WINTER HAVEN, FL 33881 CITY-ST-ZIP CITY-ST-ZIP Change **Addition** Delete TITLE TITLE mary schael 112 Waldemar Ct SE COUNCIL, DAVID P NAME NAME 3523 24TH ST SE STREET ADORESS STREET ADDRESS Winter Haven, PL 33884 **RUSKIN, FL 33560** CITY-ST-ZIP CITY-ST-ZIP Director Robert C. Turner ☐ Addition KI Change TITLE ☐ Delete TITLE NAME RALEY, WILLIAM L JR. NAME 899 w Lake Ofis Or 1325 N. LAKE OTIS DR. STREET ADDRESS STREET ADDRESS Winter Haven, FL 33880 CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN, FL 33880 TITLE Director Chairman **∑**Change ☐ Addition TITLE **PCEO** Delete Irving Wheeler, 1905 N. Lake Eloise Dr BROXTON, DOLPHUS NAME NAME 2993 PLANTATION RD STREET ADDRESS STREET ADDRESS Winter Haven, FL 33884 CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP Director ☐ Delete Change Addition TITLE TITLE Leslie W. Dunson II TURNER, ROBERT C NAME NAME 6745 Winterset Gardens Rd STREET ADDRESS 899 W. LAKE OTIS DR. STREET ADDRESS

FILED Mar 03, 2004 8:00 am

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Mary School Mary School SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR School Asst. SecITreas.

CITY-ST-ZIP

WINTER HAVEN, FL 33880

CITY-ST-7IP

Winter Haven, FL 33884