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

FILED PROFIT Apr 24 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 446875 JOHN GODDARD PRODUCE, INC. Principal Place of Business Mailing Address 1111 W. MAIN STREET LAKELAND FL 8000X 1111 W. MAIN STREET LAKELAND FL 8396K DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>02/26/1974</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1512936 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes **80000000**(the current year Intangible 24 33815 25 29 33815 Yes □ No 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GODDARD, ROBERT A 1622 DOOLEY LANE Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33813 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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 Signature, typied or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME **GODDARD (ANNIE S.)** 1.2 NAME STREET ADDRESS 4425 HARDEN BLVD. 1.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE DP 2.1 TITLE Change GODDARD, ROBERT A NAME 22 NAME 1622 DOOLEY LANE STREET ADDRESS 2.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 2. 4 CiTY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition GODDARD (RICHARD G.) NAME 3.2 NAME 4927 DEVONSHIRE LANÉ STREET ADORESS 3.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE ■ DELETE 4.1 TITLE Change Addition NAME GODDARD, JOHN D., SR 4 2 NAME STREET ADORESS 4425 HARDEN BLVD 4 3 STREET ADDRESS LAKELAND FL CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TETLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. 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 suppliemental 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 if changed, on an attachment with an address.

SIGNATURE:

O4/16/98

94/-683-598/

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition