

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 790817

**Entity Name:** FLORIDA CITRUS PACKERS**Current Principal Place of Business:**800 TRAFALGAR COURT  
SUITE 200  
MAITLAND, FL 32751**Current Mailing Address:**P.O. BOX 948153  
MAITLAND, FL 32794 US**FEI Number:** 59-0907251**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHAIRES, J. PETER  
800 TRAFALGAR COURT  
SUITE 200  
MAITLAND, FL 32751 US*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.***SIGNATURE:** J. PETER CHAIRES

04/24/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR, VP
Name	ESTES, WILLIAM C
Address	4425 NORTH US HWY 1
City-State-Zip:	VERO BEACH FL 32967

Title	DIRECTOR
Name	SALLIN, MICHEL
Address	7836 CHERRY LAKE RD
City-State-Zip:	GROVELAND FL 34736

Title	DIRECTOR, SECRETARY, TREASURER
Name	BARWICK, DON
Address	306 9TH STREET
City-State-Zip:	WINTER GARDEN FL 34787

Title	DIRECTOR
Name	STREETMAN, GEORGE H
Address	PO BOX 880
City-State-Zip:	VERO BEACH FL 32961

Title	DIRECTOR, VP
Name	CHAIRES, J. PETER
Address	800 TRAFALGAR COURT SUITE 200
City-State-Zip:	MAITLAND FL 32751

Title	DIRECTOR, VP
Name	BLACK, LARRY
Address	P.O. BOX 816
City-State-Zip:	FT. MEADE FL 33841

Title	DIRECTOR
Name	BROADAWAY, DENNIS
Address	P.O. BOX 337
City-State-Zip:	HAINES CITY FL 33845

Title	DIRECTOR
Name	CALLAHAM, STEVEN
Address	P.O. BOX 1739
City-State-Zip:	DUNDEE FL 33838

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** J. PETER CHAIRES**EXECUTIVE VICE  
PRESIDENT**

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GENKE, PAUL  
Address P.O. BOX 12969  
City-State-Zip: FT. PIERCE FL 34981

Title DIRECTOR, PRESIDENT  
Name HUNT, FRANK III  
Address P.O. BOX 631  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name RICHEY, DAN  
Address P.O. BOX 39  
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR  
Name SMITH, EMERY  
Address P.O. BOX 127  
City-State-Zip: FROSTPROOF FL 33843

Title DIRECTOR  
Name HAMNER, GEORGE JR.  
Address 7355 SW NINTH STREET  
City-State-Zip: VERO BEACH FL 32968

Title DIRECTOR  
Name NELSON, GREG  
Address 1900 OLD DIXIE HWY  
City-State-Zip: FT. PIERCE FL 34946

Title DIRECTOR  
Name SEXTON, BOBBY  
Address 695 SOUTH US HWY 1  
City-State-Zip: VERO BEACH FL 32962

Title DIRECTOR  
Name SMITH, TREY  
Address 4776 OLD DIXIE HIGHWAY  
City-State-Zip: VERO BEACH FL 32967