#### 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 248674

Entity Name: NEW HOPE SUGAR COMPANY

#### **Current Principal Place of Business:**

ONE NORTH CLEMATIS STREET SUITE 200 WEST PALM BEACH, FL 33401

## **Current Mailing Address:**

ONE NORTH CLEMATIS STREET SUITE 200 WEST PALM BEACH, FL 33401 US

## FEI Number: 59-0936637

### Name and Address of Current Registered Agent:

TABERNILLA, ARMANDO A ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

Officer/Director Detail :				
Title	DIRECTOR, PRESIDENT	Title	EV	
Name	HERNANDEZ, OSCAR R	Name	FERNANDEZ, LUIS J	
Address	ONE NORTH CLEMATIS ST SUITE 200	Address	ONE NORTH CLEMATIS ST SUITE 200	
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401	
Title	DIRECTOR, VP, TREASURER	Title	VP, ASST. SECRETARY	
Name	BLOMQVIST, ERIK J	Name	ROSS, DANIEL D	
Address	ONE NORTH CLEMATIS STREET SUITE 200	Address	ONE NORTH CLEMATIS STREET SUITE 200	
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401	
Title	VP	Title	DIRECTOR, VP, SECRETARY	
Name	RYAN, ALLAN A IV	Name	TABERNILLA, ARMANDO A	
Address	ONE NORTH CLEMATIS STREET SUITE 200	Address	ONE NORTH CLEMATIS STREET SUITE 200	
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401	
Title	VP, ASST. SECRETARY	Title	VP, ASST. TREASURER	
Name	TARR, WILLIAM F	Name	ZUKOWSKI, PHILIP M	
Address	ONE NORTH CLEMATIS STREET SUITE 200	Address	ONE NORTH CLEMATIS STREET SUITE 200	
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401	

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

DVS

# SIGNATURE: ARMANDO A TABERNILLA

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 11, 2013 Secretary of State CC6210854606

Certificate of Status Desired: No

Date