

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09030

**FILED**  
**Feb 06, 2013**  
**Secretary of State**  
**CC9609651646**

**Entity Name:** AKIN & PORTER PRODUCE OF PLANT CITY, INC.

**Current Principal Place of Business:**

UNIT 1 FARMERS MARKET  
PLANT CITY, FL 33566

**Current Mailing Address:**

P.O. BOX 1082  
PLANT CITY, FL 33564

**FEI Number:** 59-2049399

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

AMERSON, LEVAUGHN  
3512 N. YOUNG ROAD  
PLANT CITY, FL 33565 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

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           HUBBLE, TOMMY  
Address        P.O. BOX 1082  
City-State-Zip: PLANT CITY FL 33564

Title           DP  
Name           AMERSON, LEVAUGHN  
Address        3512 N. YOUNG ROAD  
City-State-Zip: PLANT CITY FL 33565

Title           ST  
Name           PERKINS, JEFF  
Address        P.O. D (HWY 45)  
City-State-Zip: GREENFIELD TN

*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.*

**SIGNATURE:** TOMMY HUBBLE

**DIRECTOR**

**02/06/2013**

Electronic Signature of Signing Officer/Director Detail

Date