PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 141799

1. Corporation Name

SEBRING PACKING CO INC

Suite, Apt. #, etc.						<u> </u>		#### #################################	
P O BOX 1289 SERRING FL 38971-1289 SUID ADDRESS SUID APPLIES	Principal Place of Business Mailing Address								
SERRING FL 21871-1789 SUBJECT AND ADDRESS 2. Multing Address 2. A Multing Address 3. Date incorporated or Couldfed 10/15/1942 2. Principal Place of Business 3. Date incorporated or Couldfed 10/15/1942 2. Principal Place of Business 3. Subject Apt. 8, etc. 3. Subject Apt	523 PEAR ST. 523 PEAR ST.								
3. Date incorporated or Qualified 10/15/1942 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-04/39948 4. FEI Number 59-04/39948 4. FEI Number 59-04/39948 4. FEI Number 59-04/39948 5. Settle 59-04/3994 5. Settle 59-04/39948 5. Settle 59-04/39948 5. Settle 59-04/3994 5. Settle 59-04/39948 5. Settle 59-04/39948 5. Settle 59-04/3994 5. Settle 59-	· · · · · · · · · · · · · · · · ·						DO NOT WRITE IN THIS	S SPACE	
2. Mailing Address 2. Mailing Address 3. Sulfe, Apt. #, etc. 3. Sulfe, Apt. #,	SEBRING FL 33871-1269 SEBRING FL 33871-1269								
2. Principal Place of Business 2a. Malling Address 2b. Most Applied For Not For		•							1
Suite, Apt. #, etc. Status Desired S. Certificate of Status Desired S. 75. Apacitional Fee Required S. Certificate of Status Desired S. Certificate of Status Desired Desired S. Certificate of Status Desired Desired S. Certificate of Status Desired Desired Desired S. Certificate of Status Desired	3 Dringing D	toes of Rusinoss	2a Mailing Address					An	nlied For
Suite, Apt. #, etc. Suite, Apt. #, etc.	`	 	alling Address				<u> </u>	<u>-</u>	
City, & State	21 Suite Ant	# etc							
City, & State	— · · ·	#, dib.	<u> </u>	Suite, Apr. #, etc.			5. Certificate of Status Desired		I
Zip Country Zip St. Trisc from cover the current year intengible of the personal Property Tax. Trust Fund Contribution Added to Fees Zip	22 City & Stat	e					6. Election Campaign Financing	\$5.00	May Be
Zip Country Zip Country Zip Country St. This corporation overs the current year intengable Prescrial Property Tax. Personal Property Tax. Yes Non-	23	ىزىمىلىنىدىدە كۆمەتلى <u>ن ئاسلامىلىلىنىمومىن سىلىك</u>					1	•	- 1
9. Namo and Address of Current Registered Agent SCHUMACHER, C.R. 523 PEAR ST. SEBRING FL 33870 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 agent. 1 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 1 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 1 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SUBMENT, pred or primed rame of implicative registered agent agents agents agent		Country		Cou	intry			ntangible	
9. Name and Address of Current Registered Agent SCHUMACHER, C.R. 523 PEAR ST. SEBRING FL 33870 84 City FL 85 City FL 85 Zip Code 86 City FL 87 City FL 88 City FL 88 City FL 89 City FL 80 City FL	24			30	•				□No
SCHUMACHER, C.R. 523 PEAR ST. SEBRING FL 33870 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 86 City FL 85 Zip Code 87 City Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 89 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85	2-71		<u> </u>	11			10. Name and Address of New Registered	l Agent	
S23 PEAR ST. SEBRING FL 33870 83 84	•				81	Name			
SEBRING FL 33870 84 City FL 85 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prince for registered agent and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent registered agent and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent registered agent and directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent registered agent and directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent registered agent and directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent registered agent and accept the obligations of Sections 12 and Agent registered agent and accept the obligations of Sections 12 and Agent registered agent and accept the obligations of Sections 12 and Agent registered agent and accept the obligations of Sections 12 and Agent registered agent registered agent registered agent and accept the appointment as registered agent regist	SCH	IUMACHER, C.R.				Ot			
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 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, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE	523	PEAR ST.			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
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 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, 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS IN 12 TITLE 13. SCHUMACHER, C.R. 12. NAME SCHUMACHER, C.R. 12. SCHUMACHER, C.R. 12. SUBMACHER, C.R. 13. SIRECTADORESS SEBRING FL. 14. CITY-ST-ZP TITLE 15. DELETE 17. TITLE 17. SCHUMACHER, C.R. 12. SUBMACHER, C.R. 12. SUBMACHER, C.R. 12. SUBMACHER, C.R. 13. SIRECTADORESS SEBRING FL. 14. CITY-ST-ZP 15. SUBMACHER, C.R. 15. SUBMACHER, C.R. 15. SUBMACHER, C.R. 16. TITLE 17. TITLE 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 19. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE	SEB	RING FL 33870			83				
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 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, 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS IN 12 TITLE 13. SCHUMACHER, C.R. 12. NAME SCHUMACHER, C.R. 12. SCHUMACHER, C.R. 12. SUBMACHER, C.R. 13. SIRECTADORESS SEBRING FL. 14. CITY-ST-ZP TITLE 15. DELETE 17. TITLE 17. SCHUMACHER, C.R. 12. SUBMACHER, C.R. 12. SUBMACHER, C.R. 12. SUBMACHER, C.R. 13. SIRECTADORESS SEBRING FL. 14. CITY-ST-ZP 15. SUBMACHER, C.R. 15. SUBMACHER, C.R. 15. SUBMACHER, C.R. 16. TITLE 17. TITLE 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 19. Change Addition 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE		•			Ш				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. In lereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Supulture, typed or printed name of registered agent and the if application. (NOTE: Registered Agent signature importance) DATE		•			84	City	FI	85 Zip C	Code
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD	agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, I	-lorida Stat	utes.			JIIIMENI 83 TE	
TITLE	12.						ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
NAME SCHUMACHER, C.R. 12 12 12 13 13 17 12 14 17 12 14 17 12 17 17	TITLE			1.1 Tf	TLE			☐ Change	☐ Addition
13 STREET ADDRESS 523 PEAR ST. 13 STREET ADDRESS 14 CITY-ST-ZIP	NAME	1		1.2 N	AME		•		
SEBRING FL	•			1.3 \$	TREET,	ADDRESS	•		
TITLE VD DELETE 21 TITLE									
ANDREWS, EMMETT 523 PEAR ST. SEBRING FL. 10TY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS			DELĒTE					☐ Change	Addition
STREET ADDRESS 523 PEAR ST 23 STREET ADDRESS 2.4 CITY-ST-ZIP SEBRING FL Change Addition		1 **		2.2 N	AME	ļ	•		
SEBRING FL. SD DELETE 3.1 TITLE Change Addition NAME HARSHMAN, WALTER E. 32 NAME STREET ADDRESS SEBRING FL 3.4 CITY-ST-ZIP TITLE TD DELETE 4.1 TITLE Change Addition NAME KOCH, LOUISE 4.2 NAME STREET ADDRESS SEBRING FL 4.4 CITY-ST-ZIP TITLE S DELETE 5.1 TITLE ASSISTANT SEBRING FL TITLE S DELETE S.1 TITLE ASSISTANT SEBRING FL TITLE S DELETE S.1 TITLE STANET SEBRING FL TITLE S DELETE S.1 TITLE STANET SEBRING FL TITLE S STREET ADDRESS SAME STREET ADDRESS SAME S.3 STREET ADDRESS STREET ADDRESS SEBRING FL TITLE DELETE S.1 TITLE C.1 TITLE C.2 NAME STREET ADDRESS SEBRING FL SEBRING FL TITLE DELETE S.1 TITLE C.2 NAME SEBRING FL TITLE DELETE S.1 TITLE C.2 NAME C.3 NAME THE SEBRING FL SEBRING FL C.3 NAME C.3 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NAME THE SEBRING FL C.4 NAME C.4 NA		1				ADDRESS			
TITLE SD DELETE 3.1 TITLE 3.2 NAME NAME HARSHMAN, WALTER E. 32 NAME STREET ADDRESS 523 PEAR ST. 3.3 STREET ADDRESS SEBRING FL 3.4 CITY-ST-ZIP TITLE TD DELETE 4.1 TITLE Change Addition NAME KOCH, LOUISE STREET ADDRESS 523 PEAR ST 4.3 STREET ADDRESS STREET ADDRESS SEBRING FL 4.4 CITY-ST-ZIP TITLE S DELETE 5.1 TITLE ASSISTANT SECRETARY MENGES, JANET A 5.3 STREET ADDRESS 523 PEAR ST 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP STREET ADDRESS 5.5 SEBRING FL 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE CHANGE ADDRESS SEBRING FL CHANGE ADDRESS SEBRING FL CHANGE ADDRESS STREET ADDRESS STREET ADDRESS SEBRING FL CHANGE ADDRESS STREET ADDRESS SEBRING FL CHANGE ADDRESS S		l				l l			
HARSHMAN, WALTER E. STREET ADDRESS CITY-ST-ZIP TITLE TD DELETE 4.1 TITLE KOCH, LOUISE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE S DELETE 4.4 CITY-ST-ZIP TITLE S MENGES, JANET A STREET ADDRESS 523 PEAR ST SEBRING FL DELETE 5.1 TITLE MENGES, JANET A STREET ADDRESS 523 PEAR ST SEBRING FL DELETE 5.1 TITLE STREET ADDRESS 5.2 STREET ADDRESS 5.2 STREET ADDRESS 5.2 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP SEBRING FL DELETE 6.1 TITLE NAME MENGES CITY-ST-ZIP Change Addition Change Addition		SD SD ST	D:DELETE				Tell and the general management of the second	Change	- Addition
STREET ADDRESS 523 PEAR ST. SEBRING FL TITLE TD NAME KOCH, LOUISE STREET ADDRESS 523 PEAR ST SEBRING FL 1.1 TITLE NAME KOCH, LOUISE STREET ADDRESS 523 PEAR ST SEBRING FL TITLE S NAME MENGES, JANET A STREET ADDRESS 523 PEAR ST SEBRING FL STREET ADDRESS 524 CITY-ST-ZIP STREET ADDRESS 525 PEAR ST STREET ADDRESS 526 STREET ADDRESS 527 PEAR ST SEBRING FL TITLE DELETE STREET ADDRESS 528 PEAR ST SEBRING FL TITLE DELETE 6.1 TITLE NAME NAME NAME DELETE GA Addition Change Addition		- · · ·		AME		•		ì	
SEBRING FL TITLE TD DELETE 4.1 TITLE NAME KOCH, LOUISE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE S MENGES, JANET A STREET ADDRESS 523 PEAR ST SEBRING FL DELETE 5.1 TITLE MENGES, JANET A STREET ADDRESS 523 PEAR ST SEBRING FL DELETE 5.1 TITLE STREET ADDRESS 523 PEAR ST STREET ADDRESS 523 PEAR ST STREET ADDRESS 523 PEAR ST SEBRING FL DELETE 6.1 TITLE NAME NAME NAME DELETE 6.1 TITLE NAME Change Addition Addition		,	•			ADDRESS			(
TITLE TD DELETE 4.1 TITLE									
NAME KOCH, LOUISE STREET ADDRESS 523 PEAR ST SEBRING FL TITLE S MENGES, JANET A STREET ADDRESS 523 PEAR ST STREET ADDRESS 524 CITY-ST-ZIP SEBRING FL DELETE 6.1 TITLE NAME NAME DELETE 6.2 NAME 6.2 NAME 6.3 NAME 6.4 NAME DELETE 6.5 NAME 6.5 NAME 6.5 NAME 6.5 NAME 6.5 NAME DELETE Change Addition Change Addition		-	☐ DELETE	_		-		☐ Change	Addition
STREET ADDRESS SEBRING FL TITLE SEBRING FL DELETE 5.1 TITLE ASSISTANT Secretary MENGES, JANET A STREET ADDRESS 5.23 PEAR ST STREET ADDRESS 5.24 CITY-ST-ZIP SEBRING FL DELETE 6.1 TITLE NAME NAME STREET ADDRESS ACTITY-ST-ZIP DELETE 6.2 NAME ASSISTANT SECRETARY MENGES, JANET L. SEBRING FL Change Addition Addition Change Addition		,		1				=	
CITY-ST-ZIP SEBRING FL TITLE S DELETE 5.1 TITLE ASSISTANT Secretary Change Addition NAME MENGES, JANET A STREET ADDRESS 523 PEAR ST CITY-ST-ZIP SEBRING FL TITLE DELETE 6.1 TITLE NAME ASSISTANT SECRETARY MENGES, JANET L. 5.2 STREET ADDRESS SEBRING, FL CHANGE Addition Change Addition Addition						ADDRESS			
TITLE S DELETE 5.1 TITLE ASSISTANT Secretary Change Addition MENGES, JANET A 52 NAME MENGES, JANET L 53 STREET ADDRESS 523 PEAR ST CITY-ST-ZIP SEBRING FL DELETE 6.1 TITLE NAME DELETE 6.2 NAME ASSISTANT Secretary MENGES, JANET L 52 DEAR ST 53 STREET ADDRESS 54 CITY-ST-ZIP Change Addition Change Addition			•			1	•		
NAME MENGES, JANET A 5.2 NAME STREET ADDRESS 5.23 PEAR ST 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP SEBRING FL TITLE DELETE 6.1 TITLE NAME CANAME MENGES, JANET L. 5.2 NAME MENGES, JANET L. 5.2 NAME MENGES, JANET L. 5.2 NAME MENGES, JANET L. 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP G.2 NAME MENGES, JANET L. Change Addition							ssistant Secretary	Change	☐ Addition
STREET ADDRESS 523 PEAR ST CITY-ST-ZIP SEBRING FL TITLE NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE NAME			500010			1	-	~ ~	_
SEBRING FL						ADDRESS 5	ENGES. JANET L. 23_PEAR ST.		
DELETE			•			-79P	EBRING, FL		
NAME 6.2 NAME		OCORING FL	□ DELETE					Change	Addition
PANIC .			□ brreie						
						ADDRESS I			

14. 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 annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on this annual report or supplied that the information indicated on the information indicated

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CiTY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/09/99

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90024 035 ***150.00