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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

167778

(0)

**DOCUMENT #** 

ST. G	SEORGE PACKING COMPAN	VY, INC.				
Principal Place of Business 1200 SHRIMPBOAT LANE P. O. BOX 2670 FT. MYERS BEACH FL 33932		Mailing Address 1200 Shrimpboat Lane P. O. Box 2670 FT. Myers Beach FL 33932				
				3. Date Incorporated or Qualified 01/02/1952	3a. Date of La 04/2	est Report 2 <b>0/1995</b>
2. Principal Pla	ice of Business  // Williams Dr.  J. etc.	2a. Mailing Address 26 P.O. B. Suite, Apt. #, etc.	2670	4. FET Number 59-0665203	<b>.</b>	Applied For Not Applicable 3.75 Additional
2		27 City & State		5. Certificate of Status Desired	<u> </u>	Fee Required
City & State 3 <i>F f</i> , 17	lyers Beach, FL	28 F. Myers	Beach FL	6. Election Campaign Financing Trust Fund Contribution	1 1	5.00 May Be Added to Fees
Zip 4 334	·	29 33432	Country 30	This corporation has liability for Florida Statutes  10. Name and Address of New Figure 1  1	i □No	
CHACE		Tiografica Agent	81 Name	10. 1141110 1110 1101000 01 11011	legistered Agen	
SHAFER, LAWRENCE W 5340 WILLIAMS DR.				fress (P.O. Box Number is Not Acceptat	ole)	
FT. MY	/ERS BEACH FL 33931-1020- \$	1026	83			··-
			84 City		FL 85	Zip Code
			and the short and and and	ration submits this statement for the re-	ruose of changing	its registered office
or registere	o the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida h, and accept the obligations of Section	a. Such change was authoriz	red by the corporation's boa	and of directors. Thereby accept the app	iointment as regis	tered agent. I am
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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, or on an attachment with an address.

SIGNATURE: Malel 7. Shefer Mabel F. Shafer March 1,1996 941-463-6357