**FILED** 

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90209 032 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUM	MENT # 183830						
1. Corporation	Name # 18383U						
CITRUS S	SERVICE, INC.			l			
			.,				
Principal Place	of Business	Mailing Address					
120 S. DILLARD		120 S. DILLARD ST. P O BOX 770218					
P O BOX 770218 WINTER GARDEN FL 34777		WINTER GARDEN FL 34777			DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualifed		ł
					03/09/1955		_
	ace of Business	2a. Mailing Address			4. FEI Number 59-1002192	Applied For Not Applicable	
Suite, Apt. #	# ata	Suite, Apt. #, etc.				\$8.75 Additional	-
22	#, etc.	27			5. Certificate of Status Desired	Fee Required	ł
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year I		ļ
24	25		30		Personal Property Tax.  10. Name and Address of New Registere	Yes □No	$\dashv$
<del></del>	9. Name and Address of Current	t Registered Agent	81 N	Name	10. Name and Address of New Registere	a Agent	$\exists$
ROPE	er, bert e.						4
120 S. DILLARD STREET			82 8	Street Addres	ss (P.O. Box Number is Not Acceptable)		ĺ
WINTER GARDEN FL 34787			83				٦
			84 0	Dia.		85 Zip Code	
				City	F	L	╝
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the above-na	amed corpor	ration submits this statement for the purpose is board of directors. I hereby accept the app	of changing its registered	
omice or re agent. I ar	egistered agent, or both, in the State to m familiar with, and accept the obligat	ions of, Section 607.0505, Flori	da Statutes.	Corporation	board of directors. This coy accept the app	omanoni do regionale	. [
SIGNATURE					when reinstating) DATE		- {
12,	Signature, typed or printed name of registered agent OFFICERS ANI		Registered Agent sig	gnature required v	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	ㅓ
TITLE	TD	☐ DELETE	1,1 TITLE			☐ Change ☐ Addition	on
NAME	ROPER, BARBARA C		1,2 NAME				╽
STREET AODRESS	120 S DILLARD ST	- 0=	1,3 STREET AD	ORESS			
CITY-ST-ZIP	WINTER GAR, FL.00000 34	<u> 181</u>	1.4 CITY-ST-ZII	Р			4
TITLE	SAT	🔀 DELETE	2.1 TITLE	SP	The stacks G.	☐ Change	nc
NAME	KING, EDWARD		2.2 NAME	140	III, Stacia G. 20'S Dillard St Dikter Gardy, FL 3		ĺ
STREET ADDRESS	516 N DILLARD ST		2.3 STREET AD	DRESS \	inter Garden, FL 3	4787	
CITY-ST-ZIP	WINTER GAR, FL 00000	☐ DELETE	2.4 CITY-ST-ZI	IP W	Mad Guidan, 1-3	☐ Change ☐ Addition	on
TITLE NAME	PD Roper, Bert e	DEFE 15	3.1 MEE 3.2 NAME				
STREET ADDRESS	120 S DILLARD ST		3.3 STREET AD	DRESS			
CITY-ST-ZIP	WINTER GAR, FL 00000 34	-787	3.4. CITY-ST-Z		_		
TITLE	٧	☐ DELETE	4.1 TITLE		,	☐ Change ☐ Addition	an
NAME	DUPPENTHALER, D., E.		4, 2 NAME				
STREET ADDRESS	120 S DILLARD ST	107	4,3 STREET AD	DRESS			•
CITY-ST-ZIP	WINTER GARDEN FL 34		4,4 CITY-ST-ZI			Change XAdditio	
TMLE		☐ DELETE	5.1 TITLE 5.2 NAME		for Charles E.	☐ Change <b>X</b> Additio	UNI
NAME			5.2 NAME 5.3 STREET AD	ORESS 17	per Charles E.	-	
STREET ADDRESS			5.4 CITY-ST-ZII	P 1.5	inter Garden FL 34	167	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	- <del>  W</del>		☐ Change ☐ Addition	on
NAME			6.2 NAME			•	
STREET ADDRESS			6.3 STREET AD	ORESS			

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 of supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed a point an attachment with an attachment with an attachment with a laterage with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Stocia 6401 35199 4

2E034 (11/98)