

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 192245

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: FLORIDA LIME & AVOCADO GROWERS, INC.

## Current Principal Place of Business:

PO BOX 9229  
FT MYERS, FL 33902 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 9229  
FT MYERS, FL 33902 US

## New Mailing Address:

FEI Number: 59-0186655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKINNER, KAREN A  
12981 TREELINE COURT  
NORTH FT. MYERS, FL 33903 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVT ( ) Delete  
Name: SKINNER, KAREN A.  
Address: 12981 TREELINE COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DP ( ) Delete  
Name: MCBRIDE, GALE  
Address: 858 CAL COVE  
City-St-Zip: FORT MYERS, FL

Title: VS ( ) Delete  
Name: YOUNG, JOE  
Address: 295 CLINTON STREET  
City-St-Zip: SHELBY, NC 28150

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT (X) Change ( ) Addition  
Name: SKINNER, KAREN A  
Address: 12981 TREELINE COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: DP (X) Change ( ) Addition  
Name: MCBRIDE, GALE  
Address: 858 CAL COVE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: DS (X) Change ( ) Addition  
Name: MCBRIDE, DANIEL S  
Address: 7700 SW 47TH PLACE  
City-St-Zip: MIAMI, FL 33147 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KAREN A. SKINNER

DVT

01/06/2005

Electronic Signature of Signing Officer or Director

Date