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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 210973

(4)

EARL J. SMALL GROWERS, INC.

FILED Apr 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							7		MAN DIRI	# WINII 1041	
6901 49TH ST NORTH PINELLAS PARK FL 34669 33761 US			6901 49TH ST NORTH PINELLAS PARK FL 84666 333781 US				DO NOT WRITE	IN THIS SPAC	:Е		
							3. Date Incorporated or Qualified				
A Drivers of Dr	and Organization		A-III A dd				04/01/1958		<u> </u>	- C - 4 E	
2. Principal Place of Business			2a. Mailing Address							plied For	
21 Suite, Apt. #, etc			Suite, Apt. #, etc.				59-0830646			t Applicable Additional	
22			27				5. Certificate of Status Desired Fee Required				
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	2	Zip 3378 Co				8. This corporation owes or has pa				
24 3378 l 25 25 p. Name and Address of Current R			.00				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
<u> </u>		1 Nam		10. Name and Address of New Ke	gistered Agen						
	ALL, MILDRED			[I Nam	6					
6901 49TH ST N PINELLAS PARK FL 34665 3375			1			t Addres	dress (P.O. Box Number is Not Acceptable)				
PAN	ETTINO LYLIN LT 94000 723	,-		8	13						
				-	4 City			85	: Zin (Code	
					1 7			FL I	<u> 33</u>	Code 378 /	
11. Pursuant to	utes, the abo authorized	by the co	od corpor poratio	vation submits this statement for the pon's board of directors. I hereby acceptions	surpose of chain of the appointm	nging it nent as	s registered registered				
	Florida Statu A.Con	les.	جوا.		4-10-9	3,6					
SIGNATURE (d when reinstating)	DATE						
12.	Signature, typed or printed name of registered as OFFICERS Af			13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIR	ECTOR	S IN 12	
TITLE	D		DELETE	1.1 TITU	E	D			Change	Addition	
NAME	COWDEN, L. GRADY			1.2 NAM	E		ISTABLE LISA				
STREET ADDRESS	6901 49TH ST NORTH			1.3 STRI	ET ADDRES	3 696	ISTABLE, LISA OI - 49th St. NORTH				
CITY-ST-ZIP	PINELLAS PARK FL 84666	<u> 1872E</u>			-ST-ZIP	Pu	HELLAS PARK, FI. 3378				
TITLE	D		☐ DELETE	2.1 TITU					Change	Addition	
NAME	GERMANY, JOHN			2.2 NAV							
STREET ADDRESS	6901 49TH STREET NORTH	6.1			ET ADORES	š					
CITY-ST-ZIP	PINELLAS PARK FL 337	81	DELETE		r-st-zip		 		Change	Addition	
TITLE	D CMALL MILIDOED		my Dereit	3.1 TITL				, L	าเขเกิด	LLJ AUGUON	
NAME	SMALL, MILDRED 6901 49 ST. N.			3.2 NAM		_					
STREET ADDRESS	PINELLAS PARK FL 3378	1			ET ADDRES	'					
CITY - ST - ZIP	D LINETTYS LYNN LT 2210) •	DELETE	4.1 TITU	(-ST-ZIP				Change	Addition	
NAME	HOLLIS, RICHARD			4, 2 NA							
STREET ADDRESS	6901 49TH STREET NORTH				ET ADDRES						
CITY-ST-ZIP		337 81			-ST-ZIP	<u> </u>					
TITLE	D		DELETE	5.1 THTU		+			Change	Addition	
NAME	CUMMISKEY, PAUL			5.2 NAM					-		
STREET ADDRESS	6901 49TH STREET NORTH				ET ADDRES	s					
City-St-ZIP	PINELLAS PARK FL 84885	3378	i		-ST-ZIP						
TITLE	D		DELETE	6.1 TITU		1			Change	Addition	
NAME	SMALL, THOMAS			6.2 NAM	E						
STREET ADDRESS	6901 49TH STREET NORTH			6.3 STRI	ET ADDRES	s					
CITY-ST-ZIP	PINELLAS PARK FL 84865	33781			-ST-ZIP						

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 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, or on an attachment with an address. SIGNATURE: La a. Constalla Was A. Constable

(813) 526-9113