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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

LAKE NED GROWERS INC

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 146 AVENUE B. N.W. C/O ROY C. SUMMERLIN WINTER HAVEN FL 33881-4506 146 AVENUE B. N.W. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/04/1962	41011 [041
C/O ROY C. SUMMERLIN WINTER HAVEN FL 33881-4506 C/O ROY C. SUMMERLIN DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
l	
BAIBA/10¢9	
 	plied For
O MOLEO	t Applicable
5. Certificate of Status Desired Fee Re	
City & State 6. Election Campaign Financing \$5.00	
23 Trust Fund Contribution Added t	
Zip Country Zip Country 8, This corporation owes or has paid the current year Inter-	angible No
24 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	3 NO
041 Nome	
SUMMERLIN, ROY C.	
146 AVENUE B, N.W. 82 Street Address (P.O. Box Number is Not Acceptable)	ļ
WINTER HAVEN FL.	
84 City FL 85 Zip C	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	s 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 a agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	S IN 12
TITLE PD DELETE 1.1 TITLE Change	Addition
NAME ZAUSNER, RICHARD 12 NAME	
STREET ADDRESS 100 HARBOR ROAD 1.3 STREET ADDRESS	
CITY-ST-ZIP PORT WASHINGTON NY 1.4 CITY-ST-ZIP	
TITLE D DELETE 2.1 TITLE Change	Addition
NAME ZAUSNER, MARTIN 22 NAME	İ
STREET ADDRESS 923 FIFTH AVE 2.3 STREET ADDRESS .	1
CITY-ST-ZIP NEW YORK, NY 00000 2.4 CITY-ST-ZIP	
TITLE VPS DELETE 3.1 TITLE Change	Addition
NAME ZAUSNER, ANNABELL 3.2 NAME	
STREET ADDRESS 100 HARBOR ROAD 3.3 STREET ADDRESS	
CITY-ST-ZIP PORT WASHINGTON FL 3.4 CITY-ST-ZIP	
TITLE TD DELETE 4.1 TITLE Change	Addition
NAME RUSSO, RONALD 4.2 NAME	f
STREET ADDRESS 100 HARBOR ROAD 4.3 STREET ADDRESS	
CITY-ST-ZIP PORT WASHINGTON NY 4.4 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE Change	Addition
NAME 5.2 NAME	İ
STREET ADDRESS 5.3 STREET ADDRESS	
CITY+ST-ZIP 5.4 CITY+ST-ZIP	
TITLE DELETE 6.1 TITLE Change	Addition
NAME 6.2 NAME	Ì
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP	

nique and on this armular report or supplemental armular report is are and accurate and that my signature shall have the same legal effect as it made under oath; that I am ar 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.