

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90119 046 ***150.00

DOCUMENT # 283802

1. Entity Name
SUNCREST CITRUS, INC.

Principal Place of Business

7400 STATE ROAD 544
WINTER HAVEN FL 33881
US

Mailing Address

7400 STATE ROAD 544
WINTER HAVEN FL 33881

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1105197

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INGRAM, BRUCE B. JR.
7500 HUTCHINSON ROAD
HAINES CITY FL 33844

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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  / Bruce B. Ingram, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME INGRAM, BRUCE B JR
STREET ADDRESS 7500 HATCHINEHA RD
CITY-ST-ZIP HAINES CITY FL

TITLE DP ☒ Change ☐ Addition
NAME Mary Ellen Tramontin
STREET ADDRESS 157 Homewood Ct. Winter Haven, FL
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME TRAMONTIN, MARY ELLEN
STREET ADDRESS 157 HOMEWOOD COURT
CITY-ST-ZIP WINTER HAVEN FL

TITLE DVP ☒ Change ☐ Addition
NAME Bruce B. Ingram, Jr.
STREET ADDRESS 7500 Hatchineha Rd.
CITY-ST-ZIP Haines City, FL 33843

TITLE DPT ☒ Delete
NAME INGRAM, LUCILLE C
STREET ADDRESS 211 W CYPRESS ST
CITY-ST-ZIP DAVENPORT FL

TITLE DST ☒ Change ☐ Addition
NAME Linda Budd
STREET ADDRESS 3107 S Turkey Creek Rd.
CITY-ST-ZIP Plant City, FL

TITLE D ☐ Delete
NAME BUDD, LINDA
STREET ADDRESS 3107 S. TURKEY CREEK RD.
CITY-ST-ZIP PLANT CITY, F

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  / Bruce B. Ingram, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/2002

Date

Daytime Phone #

CR2E034 (9/01)