## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 22, 2007 8:00 am Secretary of State **DOCUMENT #299671** 03-22-2007 90005 040 \*\*\*150.00 1. Entity Name WINTER GARDEN FRUIT CO INC Principal Place of Business Mailing Address 40000000 721 STATE RD 535 721 STATE RD 535 WINTER GARDEN, FL 34787-5266 WINTER GARDEN, FL 34787-5266 3. Mailing Address P.O. Box 770879 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc 02052007 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For MINTER GARDEN 59-1109157 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 34787 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DUPPENTHALER, D E Street Address (P.O. Box Number is Not Acceptable) 721 STATE RD 535 WINTER GARDEN, FL 32787 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TSFLE TETLE ☐ Change ☐ Addition ☐ Delete DUPPENTHALER, DALLAS E SR NAME NAME 721 STATE RD 535 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN, FL 34787 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DUPPENTHALER, BETTY NAME STREET ADDRESS 721 STATE RD 535 STREET ADDRESS WINTER GARDEN, FL 34787 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE DUPPENTHALER, BETTY 721 STATE RD 535 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY - ST - ZIP ☐ Delete TITLE Change ■ Addition TITLE DUPPENTHALER, DE JR STREET ADDRESS 721 STATE RD 535 STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition AYCOCK, JANE D NAME STREET ADDRESS 721 STATE RD 535 STREET ADDRESS WINTER GARDEN, FL 34787 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition DAST TITLE TITLE CROSS, ANN D NAME NAME STREET ADDRESS 721 STATE RD 535 STREET ADDRESS WINTER GARDEN, FL 34787 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED