

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90014 045 ***150.00

DOCUMENT # 307744

1. Entity Name

HUBERT GRAVES CITRUS, INC.



Principal Place of Business
2205 14TH AVE
STE. 200
VERO BEACH FL 32960
US

Mailing Address
PO BOX 6190
VERO BEACH FLA 32961
US



2. Principal Place of Business - No P.O. Box #

4575 12TH STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VERO BEACH, FL

City & State

4. FEI Number 59-1147842

Applied For

Not Applicable

Zip

Country

Zip

Country

32966

US

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

GRAVES JR, HUBERT
2205 14TH AVE
STE. 200
VERO BEACH FL 32961

Name

GRAVES JR, HUBERT

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

4575 12TH ST.

City

VERO BEACH

FL

Zip Code
32966

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD
NAME GRAVES, JEANNE S ☐ Delete
STREET ADDRESS 4575 ROSEDALE RD
CITY- ST- ZIP VERO BEACH, FL 00000

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

TITLE PD
NAME GRAVES JR, HUBERT ☐ Delete
STREET ADDRESS 4575 ROSEDALE RD
CITY- ST- ZIP VERO BEACH, FL 00000

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

TITLE D
NAME HOOVER, JANIE GRAVES ☐ Delete
STREET ADDRESS 4575 ROSEDALE ROAD
CITY- ST- ZIP VERO BCH. FL

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

TITLE D
NAME GRAVES, JULIA A. ☐ Delete
STREET ADDRESS 4575 ROSEDALE RD
CITY- ST- ZIP VERO BCH. FL

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

TITLE D
NAME BARTLETT, JEANE GRAVES ☐ Delete
STREET ADDRESS 4575 ROSEDALE RD.
CITY- ST- ZIP VERO BCH. FL

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Hubert Graves, Jr. / HUBERT GRAVES, JR 4-2-07 772-562-6557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #