

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90138 026 \*\*\*150.00

**DOCUMENT # 340171**

1. Entity Name  
**BECKER INDIAN RIVER FRUIT CO INC**



Principal Place of Business

**660 BEACHLAND BLVD  
SUITE 201  
VERO BCH FL 32963  
US**

Mailing Address

**660 BEACHLAND BLVD  
SUITE 201  
VERO BCH FL 32963  
US**

2. Principal Place of Business

**2627 S. Jenkins Road**

3. Mailing Address

**2627 S. Jenkins Road**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Ft. Pierce, FL**

City & State

**Ft. Pierce, FL**

4. FEI Number

**59-1228782**

Applied For

Not Applicable

Zip

**34981**

Country

**USA**

Zip

**34981**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**HURLEY, THOMAS**

**660 BEACHLAND BLVD**

**SUITE 201**

**VERO BCH FL 32963**

7. Name and Address of New Registered Agent

Name  
**Thomas Hurley**

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

**2627 S. Jenkins Road**

City  
**Ft. Pierce,**

**FL**

Zip Code  
**34981**

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

*Thomas Hurley*

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

**Thomas Hurley**

DATE

**4/02/03**

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 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

TITLE	<b>CD</b>	<input type="checkbox"/> Delete
NAME	<b>BECKER, RICHARD E</b>	
STREET ADDRESS	<b>14 SEA COURT</b>	
CITY-ST-ZIP	<b>VERO BEACH FL 32963</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>CUSSON, JEFFERY L</b>	
STREET ADDRESS	<b>736 36TH AVENUE</b>	
CITY-ST-ZIP	<b>VERO BEACH FL 32968</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> Delete
NAME	<b>HURLEY, THOMAS</b>	
STREET ADDRESS	<b>660 BEACHLAND BLVD STE 201</b>	
CITY-ST-ZIP	<b>VERO BCH FL 32963</b>	
TITLE	<b>VPD</b>	<input type="checkbox"/> Delete
NAME	<b>HURLEY, SCOTT R</b>	
STREET ADDRESS	<b>660 BEACHLAND BLVD STE 201</b>	
CITY-ST-ZIP	<b>VERO BCH FL 32963</b>	
TITLE	<b>TD</b>	<input type="checkbox"/> Delete
NAME	<b>HURLEY, RICHARD E</b>	
STREET ADDRESS	<b>660 BEACHLAND BLVD STE 201</b>	
CITY-ST-ZIP	<b>VERO BCH FL 32963</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HURLEY, BARBARA</b>	
STREET ADDRESS	<b>381 INDIAN HARBOR RD</b>	
CITY-ST-ZIP	<b>VERO BCH FL 32963</b>	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>TD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Thomas Hurley</b>	
STREET ADDRESS	<b>2627 S. Jenkins Road</b>	
CITY-ST-ZIP	<b>Ft. Pierce, FL 34981</b>	
TITLE	<b>VPD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>R. Scott Hurley</b>	
STREET ADDRESS	<b>2627 S. Jenkins Road</b>	
CITY-ST-ZIP	<b>Ft. Pierce, FL 34981</b>	
TITLE	<b>SD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Richard E. Hurley</b>	
STREET ADDRESS	<b>2627 S. Jenkins Road</b>	
CITY-ST-ZIP	<b>Ft. Pierce, FL 34981</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Thomas Hurley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Thomas Hurley**

Date

**4/02/03**

**772-595-3100**

CR2E034 (10/02)

Attachment

90073325  
# 340171



**BECKER**  
HOLDING CORPORATION

ADDITION;

DIRECTOR  
JO ANN BECKER  
155 SAGO PALM ROAD  
VERO BEACH, FL 32963