

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **396119** (0)
1. Corporation Name
GRACEWOOD FRUIT CO.



Principal Place of Business
**1626 90TH AVENUE
P O BOX 370
VERO BEACH FL 32961-7370**

Mailing Address
**1626 90TH AVENUE
P O BOX 370
VERO BEACH FL 32961-7370**

3. Date Incorporated or Qualified **02/18/1972** 3a. Date of Last Report **05/11/1995**

4. FEI Number **59-1384474** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**SMITH, HEATH, SMITH AND O'HAIRE
2205 14TH AVENUE
VERO BEACH FL 32960**

10. Name and Address of New Registered Agent

81 Name **Danforth K. Richardson**
82 Street Address (P.O. Box Number is Not Acceptable)
1626 - 90th Avenue
83 City
Vero Beach, FL 85 Zip Code **32966**

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 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 registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *D. K. Richardson* **Danforth K. Richardson** 4/19/96

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	<input type="checkbox"/> DELETE	1 1 TITLE	DIRECTOR	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	RICHARDSON, DANFORTH K.		2 NAME	HOPKINS CARTER W.			
STREET ADDRESS	1855 28 AVENUE		3 STREET ADDRESS	1580 Gracewood Lane			
CITY-ST-ZIP	VERO BCH. FL		4 CITY-ST-ZIP	Vero Beach, Fla. 32963	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
TITLE	PD	<input type="checkbox"/> DELETE	2 1 TITLE	DIRECTOR			
NAME	LUTHER, JOHN M		2 NAME	KAHLE, SANDRA R.			
STREET ADDRESS	555 SOUTH A1A HIGHWAY		3 STREET ADDRESS	6020 S.W. 5th St. Vero Beach, Fla			
CITY-ST-ZIP	VERO BEACH FL		4 CITY-ST-ZIP	32968	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
TITLE	TS	<input type="checkbox"/> DELETE	3 1 TITLE	DIRECTOR			
NAME	PEREZ, TOMAS RENE		3 2 NAME	MARJORIE H. RICHARDSON			
STREET ADDRESS	2019 CORTEX AVENUE		3 3 STREET ADDRESS	1855 - 23th Ave.			
CITY-ST-ZIP	VERO BEACH FL		3 4 CITY-ST-ZIP	Vero Beach, FL 32960			
TITLE	ATD	<input type="checkbox"/> DELETE	4 1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	HOPKINS, SUSAN R.		4 2 NAME				
STREET ADDRESS	265 RIVERWAY DR		4 3 STREET ADDRESS				
CITY-ST-ZIP	VERO BCH. FL		4 4 CITY-ST-ZIP				
TITLE	VPO	<input type="checkbox"/> DELETE	5 1 TITLE				
NAME	KAHLE, GEORGE A		5 2 NAME				
STREET ADDRESS	6020 SW 11TH STREET		5 3 STREET ADDRESS				
CITY-ST-ZIP	VERO BCH. FL 32963		5 4 CITY-ST-ZIP				
TITLE	ASD	<input type="checkbox"/> DELETE	6 1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	LUTHER, NANCY R		6 2 NAME				
STREET ADDRESS	555 SOUTH A1A HIGHWAY		6 3 STREET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL		6 4 CITY-ST-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *D. K. Richardson* **D. K. Richardson, Chairman** 4/19/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-567-1151-Ext. 333

CR2E034 (12/95)