

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 396119 (0)
1. Corporation Name
GRACEWOOD FRUIT CO.



Principal Place of Business 1626 80TH AVENUE P O BOX 370 VERO BEACH FL 32961-7370	Mailing Address 1626 80TH AVENUE P O BOX 370 VERO BEACH FL 32961-7370
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/18/1972	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1384474	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RICHARDSON, DANFORTH K 1626 80TH AVENUE VERO BEACH FL 32968		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		FL	85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	
NAME	RICHARDSON, DANFORTH K.	1.2 NAME	
STREET ADDRESS	1855 28 AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	VERO BCH. FL	1.4 CITY - ST - ZIP	
TITLE	PD	2.1 TITLE	
NAME	LUTHER, JOHN M	2.2 NAME	
STREET ADDRESS	555 SOUTH A1A HIGHWAY	2.3 STREET ADDRESS	
CITY - ST - ZIP	VERO BEACH FL	2.4 CITY - ST - ZIP	
TITLE	TS	3.1 TITLE	
NAME	PEREZ, TOMAS RENE	3.2 NAME	
STREET ADDRESS	2019 CORTEX AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	VERO BEACH FL	3.4 CITY - ST - ZIP	
TITLE	ATD	4.1 TITLE	
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	VPD	5.1 TITLE	
NAME	KAHLE, GEORGE A	5.2 NAME	
STREET ADDRESS	8020 SW 5TH STREET	5.3 STREET ADDRESS	
CITY - ST - ZIP	VERO BCH. FL 32968	5.4 CITY - ST - ZIP	
TITLE	ASD	6.1 TITLE	
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 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 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: _____ DATE: 4/23/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)