## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 01, 2006 8:00 am Secretary of State DOCUMENT, # 396119 1. Entity Name 05-01-2006 90445 030 \*\*\*150.00 GRACEWOOD FRUIT CO. Principal Place of Business Mailing Address P.O. BOX 370 VERO BEACH FL 32961 1626 90TH AVENUE P O BOX 370 VERO BEACH FL 32961-7370 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 59-1384474 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RICHARDSON, DANFORTH K Street Address (P.O. Box Number is Not Acceptable) **1626 90TH AVENUE** VERO BEACH FL 32966 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE ☐ Change \*Addition NAME RICHARDSON, DANFORTH K NAME KAHLE, SANDRA R. STREET ADDRESS 1035 ST. JAMES CI STREET ADDRESS 6020 SW - 5th Street VERO BEACH FL 32967 CITY-ST-7IP CITY-ST-7IP Vero Beach, FL 32968 TITLE ☐ Delete TITLE ☐ Change Addition NAME LUTHER, JOHN M NAME HOPKINS, CARTER W. STREET ADDRESS STREET ADDRESS 555 SOUTH A1A HIGHWAY 1580 Gracewood Lane Vero Beach, FL 32963 CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME PEREZ, TOMAS RENE 2019 CORTEZ AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32960 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HOPKINS, SUSAN R. NAME 1580 GRACEWOOD LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BCH. FL 32963 CITY-ST-ZIP ☐ Delete ☐ Addition KAHLE, GEORGE A NAME NAME 6020 SW 5TH STREET STREET ADDRESS STREET ADDRESS VERO BCH. FL 32968 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition LUTHER, NANCY R NAME NAME 555 SOUTH A1A HIGHWAY STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing goes 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. 772-567-1151

SIGNATURE AND TYPED OR PRINTED DATE TO DESCRIPTION OF SIGNAM OF SI

April 21, 2006

**FILED** 

Ext.8233

Daytime Phone #