

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 469994

1. Entity Name
D & V CITRUS SALES, INC.



Principal Place of Business
**4889 NORTH FEDERAL HWY
PO BOX 1148
VERO BCH, FL 32961-1148**

Mailing Address
**4889 NORTH FEDERAL HWY
PO BOX 1148
VERO BCH, FL 32961-1148**



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1580224	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**O'HAIRE, MICHAEL
3111 CARDINAL DR.
VERO BEACH, FL 32963**

**DO NOT WRITE
IN THIS SPACE**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**000000382794
01/12/06-80028-007 150.00**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KNIGHT, D VICTOR
STREET ADDRESS	1335 RIVER RIDGE DR
CITY - ST - ZIP	VERO BEACH, FL 32963
TITLE	STD
NAME	RICHEY, AUDREY
STREET ADDRESS	2625 E 63RD ST
CITY - ST - ZIP	VERO BEACH, FL 32973
TITLE	VPD
NAME	RICHEY, DANIEL R
STREET ADDRESS	2625 E 63RD STREET
CITY - ST - ZIP	VERO BEACH, FL 32971
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: *D. Victor Knight*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/06/06

Date

772 562 4155

Daytime Phone #

D. VICTOR KNIGHT