

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 488969 (7)

1. Corporation Name

NEVINS FRUIT CO., INC.



Principal Place of Business

Mailing Address

2900 PARRISH RD
P.O. DRAWER L
TITUSVILLE FL 32781-7359

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P.O. DRAWER L
TITUSVILLE FL 32781-7359

3. Date Incorporated or Qualified

11/05/1975

3a. Date of Last Report

04/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FET Number

59-1624949

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

22

27

23

28

24

Country

29

Country

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARRISH, J J III
2900 PARRISH RD
TITUSVILLE FL 32781

61. Name

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

63.

64. City

FL

65. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

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

(If title "Registered Agent" signature required, attach to this filing)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSD
PARRISH, III JJ
1013 INDIAN RIVER AVE.
TITUSVILLE, FL 00000

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VTD
PARRISH, BETTY P.
909 INDIAN RIVER AVE.
TITUSVILLE, FL 00000

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
SALVESON, ROBERT E.
3688 MUIRFIELD DRIVE
TITUSVILLE FL 32780

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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:

J.J. PARRISH III, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96

Date

(407) 267-1831

Daytime Phone #

CR2E034 (12/95)