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 # **696778** **(0)**

1. Corporation Name

L & R FRUIT CO., INC.

Principal Place of Business

~~2810 BRIARWOOD LANE~~
~~TITUSVILLE FL 32796-1624~~

Mailing Address

~~2810 BRIARWOOD LANE~~
~~TITUSVILLE FL 32796-1624~~

3. Date Incorporated or Qualified: **07/30/1981**

3a. Date of Last Report: **04/11/1995**

4. FEI Number: **59-2119990** ☐ 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 2800 US #1
Suite, Apt. #, etc.
22 Mims ~~FL~~. FL
City & State
23 F
Zip 24 32754 Country 25 USA

2a. Mailing Address
26 2800 US #1
Suite, Apt. #, etc.
27
City & State
28 Mims, FL.
Zip 29 32754 Country 30 USA

9. Name and Address of Current Registered Agent

LUCAS, LLOYD
2810 BRIARWOOD LANE
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name SAME
82 Street Address (P.O. Box Number is Not Acceptable) 2800 US #1
83
84 City Mims FL 85 Zip Code 32754

11. Pursuant to the provisions of Section 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP ☐ DELETE	1-1 TITLE	SAME ☐ Change ☐ Addition
NAME	LUCAS, LARRY	1-2 NAME	
STREET ADDRESS	3009 LIME STREET	1-3 STREET ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	1-4 CITY-ST-ZIP	
TITLE	P ☐ DELETE	2-1 TITLE	Lucas, Lloyd ☐ Change ☐ Addition
NAME	LUCAS, LLOYD	2-2 NAME	
STREET ADDRESS	2810 BRIARWOOD LANE	2-3 STREET ADDRESS	3502 Dunn St
CITY-ST-ZIP	TITUSVILLE, FL 00000	2-4 CITY-ST-ZIP	Mims, FL. 32754
TITLE	S ☐ DELETE	3-1 TITLE	S ☐ Change ☐ Addition
NAME	LUCAS, JACQUELINE	3-2 NAME	Lucas, Jacqueline
STREET ADDRESS	2810 BRIARWOOD LANE	3-3 STREET ADDRESS	3502 Dunn St
CITY-ST-ZIP	TITUSVILLE FL	3-4 CITY-ST-ZIP	Mims, FL.
TITLE	T ☐ DELETE	4-1 TITLE	SAME ☐ Change ☐ Addition
NAME	LUCAS, JAMES H.	4-2 NAME	
STREET ADDRESS	4300 SE 59TH	4-3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL	4-4 CITY-ST-ZIP	
TITLE	☐ DELETE	5-1 TITLE	☐ Change ☐ Addition
NAME		5-2 NAME	
STREET ADDRESS		5-3 STREET ADDRESS	
CITY-ST-ZIP		5-4 CITY-ST-ZIP	
TITLE	☐ DELETE	6-1 TITLE	☐ Change ☐ Addition
NAME		6-2 NAME	
STREET ADDRESS		6-3 STREET ADDRESS	
CITY-ST-ZIP		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)(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: Lloyd D Lucas 4-6-96 407-268-2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)