

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90268 014 ****61.25

DOCUMENT # 739209

1. Entity Name
**FLORIDA CITRUS PRODUCTION MANAGERS
ASSOCIATION, INC.**



Principal Place of Business
**3500 LAKE ALFRED ROAD
WINTER HAVEN, FL 33881 US**

Mailing Address
**3500 LAKE ALFRED ROAD
WINTER HAVEN, FL 33881 US**

50005629



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03232006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1808558

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SUTTON, DONALD
3500 LAKE ALFRED ROAD
WINTER HAVEN, FL 33881**

Name

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

City

FL

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

Donald Sutton - Donald Sutton

3-22-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1V
MCNEER, JASON
235 WEST PARK LANE
LAKE ALFRED, FL 33881** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Jerry Newlin
3584 SE Brown Rd.
ARCADIA, FL 34266** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COUNTER, CHARLES
2085 WEST LAKE HAMITON DR
WINTER HAVEN, FL 33881** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2nd VP
Jay Whitaker
P.O. Box 3346
Sebring, FL 33871-3346** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SHINN, CHARLES III
11975 10TH ST
VERO BEACH, FL 32966** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1st. VP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
SUTTON, DONALD
998 S. LAKE ELBERT DR S.E.
WINTER HAVEN, FL 33880** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
DUBOIS, MARK
4001 SEMINOLE PRATT WHITNEY RD
OKEECHOBEE, FL 34972** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1st. VP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2V
SNIVELY, JAMES A
244 HUNTLEY OAKS BOULEVARD
LAKE PLACID, FL 33852** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1st. VP ☒ Change ☐ Addition

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 617, 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:

Donald Sutton - Donald Sutton

3-22-06

863-2934406

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #