

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762401

Entity Name: SARASOTA FRUIT AND NUT SOCIETY, INC.

FILED  
Jan 13, 2004  
Secretary of State

**Current Principal Place of Business:**

POB 536  
NOKOMIS, FL 34274 US

**New Principal Place of Business:**

**Current Mailing Address:**

POB 536  
NOKOMIS, FL 34274 US

**New Mailing Address:**

FEI Number: 59-2170207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RICHARD T. BUSHELL  
740 SUFFOLK CIRCLE  
NOKOMIS, FL 34275 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: GREENWALD, ROBERT  
Address: 2000 S TAMIAMI TR  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: SIMS, DEBRA  
Address: 330 LYCHEE RD  
City-St-Zip: NOKOMIS, FL 34275

Title: VD ( ) Delete  
Name: REHMANI, QAMAR  
Address: 5408 NEW COVINGTON DRIVE  
City-St-Zip: SARASOTA, FL 34233

Title: SD ( ) Delete  
Name: FOX, BONNIE  
Address: 312 DALE ST  
City-St-Zip: NOKOMIS, FL 34275

Title: PD ( ) Delete  
Name: BUSHELL, RICHARD T  
Address: 740 SUFFOLK CIR  
City-St-Zip: NOKOMIS, FL 34275

Title: TVD (X) Delete  
Name: BRUCKNER, RANDAL  
Address: 1940 CANARY ISLAND  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: BODDINGTON, BRETT  
Address: 3577 ELDON AVE  
City-St-Zip: NORTH PORT, FL 34286

Title: TVD (X) Change ( ) Addition  
Name: SIMS, DEBRA  
Address: 330 LYCHEE RD  
City-St-Zip: NOKOMIS, FL 34275

Title: VD (X) Change ( ) Addition  
Name: JOE, BARRETTA  
Address: 1118 HOOVER ST  
City-St-Zip: NOKOMIS, FL 34275

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA SIMS

TVD

01/13/2004

Electronic Signature of Signing Officer or Director

Date