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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **768484** (8)

1. Corporation Name

FLORIDA RICE COUNCIL, INC.

Principal Place of Business

Mailing Address

**8050 S US 27
8050 S. U.S. 27
SOUTH BAY FL 33493
US**

~~0/0 GARY JAMES M~~
**P. O. BOX 1210
BELLE GLADE FL 33430
US**

3. Date Incorporated or Qualified

05/17/1983

4. FEI Number

59-2821964

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. #, etc.

26
Suite, Apt. #, etc.

22
City & State

27
City & State

23
Zip Country

28
Zip Country

24
Country

29
Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROTH, RAYMOND R., JR.
232 N.W. AVENUE L
BELLE GLADE FL 33430**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	ROTH, RAYMOND R. JR.	
STREET ADDRESS	232 N.W. N.W. AVENUE L	
CITY-ST-ZIP	BELLE GLADE FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	PERDOMO, RAUL	
STREET ADDRESS	13733 EXOTICA LANE	
CITY-ST-ZIP	W PALM BEACH FL	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

TITLE	VP	<input type="checkbox"/> DELETE
NAME	PORRO, MANUEL	
STREET ADDRESS	1510 THE TWELFTH FAIRWAY	
CITY-ST-ZIP	W PALM BEACH FL	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	SENGELMANN, KLAUS	
STREET ADDRESS	1147 READING TERRACE	
CITY-ST-ZIP	W PALM BEACH FL	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

TITLE	T	<input type="checkbox"/> DELETE
NAME	UNDERBRINK, ROBERT J.	
STREET ADDRESS	8050 SOUTH U.S. 27	
CITY-ST-ZIP	SOUTH BAY FL	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	RECIO, EDUARDO	
STREET ADDRESS	ATLANTIC SUGAR ROAD	
CITY-ST-ZIP	BELLE GLADE FL	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Klaus Sengelmann* **KLAUS SENGLMANN** 3/30/98 (SH) 996-6054

CR2E037 (10/97)