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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

(6)

FILED									
Feb	18	1998	8:00am						
Se	cre	tary o	of State						

OSLO	CITRUS GROWERS A	SSOCIATION						
Principal Place of Business Mailing Address			, , , , , , , , , , , , , , , , , , , ,	T INDITIA LABORA CARILL BEATER THEN THEN ALEN BURN BY BANK BURN BEAT BURN AREA				
695 S US HWY #1						 3. Date Incorporated or Qualified 06/12/1967 4. FEI Number 59-0386260 	Applied For Not Applicable	
2. Principal Place of Business		2a. Mailing Addr	2a. Mailing Address 26			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State	├ ¬ '		7. Is this nonprofit corporation a homeowners association?			
Zıp	Country 25	Ζiρ 29	Z _i p Country			, creating that dub eather	Yes No	
	9, Name and Address of	Current Registered Agent				10. Name and Address of New Registered A	gent	
				81	Name			
EGAN III, J B 695 S US HWY #1 VERO BCH FL 32962				82	Street A	ddress (P.O. Box Number is Not Acceptable)		
				63				
				64	City	FL	85 Zip Code	
office o	nt to the provisions of Sections or registered agent, or both, in the Lam familiar with, and accept the	ne State of Florida. Such chan	igio was author	ized by	the corp	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appora-	changing its registered intment as registered	
SIGNATURE	Signature, typed or printed name of reg	whereast are at the discourse states	(NOTE Posse	tered Ane	nt Signature	required when reinstating) DATE		
12. OF ICERS AND DIRE CTORS 13.					··· arthumo.p	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE				.1 TITLE	I		Change Addition	
NAME	SEXTON, RALPH W		1	2 NAME				

RANCH RD 1.3 STREET ADDRESS STREET ADDRESS **VERO BCH FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change ■ Addition DELFTE 2.1 TITLE TITLE STD 2.2 NAME NAME EGAN, J B III 4631 9TH PL 23 STREET ADDRESS STREET ADDRESS **VERO BCH FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition Change DELETE 31 TITLE TITLE BAILEY, JAMES L 3.2 NAME NAME 2402 BUENA VISTA BLVD 3.3 STREET ADDRESS STREET ADDRESS VERO BCH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE SEXTON, CHARLES R 4. 2 NAME NAME 4990 11TH LANE 4.3 STREET ADDRESS STREET ADDRESS VERO BCH FL 4.4 CITY - ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE BARR, JOSEPH R. 5.2 NAME NAME SANDPIPER POINT 5.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition 6.1 THILE TITLE SEXTON. CHARLES R JR 6.2 NAME NAME 4650 17TH STREETE SW **63 STREET ADDRESS** STREET ADDRESS

14. I horoby 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 an attachment with an address VERO BCH FL

SIGNATURE: