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May 28 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # 790441 (0)  
1. Corporation Name  
SEBASTIAN CITRUS ASSOCIATION

Principal Place of Business Mailing Address  
9980 U.S. HIGHWAY #1 PO BOX 780357  
SEBASTIAN FL 32958 SEBASTIAN FL 32978

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 25 Country 29 Country 30 Country

3. Date Incorporated or Qualified  
06/12/1967  
4. FEI Number  
59-6071096  
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  
VICKERS, DONALD S  
13995 N. INDIAN RIVER DRIVE  
SEBASTIAN FL 32958  
10. Name and Address of New Registered Agent  
81 Name Michael E. Vickers  
82 Street Address (P.O. Box Number is Not Acceptable)  
949 Fulton Way  
83  
84 City Sebastian FL 85 Zip Code 32958

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]* DATE 5-21-98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
VD VICKERS, DONALD S 13995 N. INDIAN RIVER DR SEBASTIAN FL  
PD ROGERS, DOROTHY V 9980 US #1 SEBASTIAN FL  
STD SARMELA, BETTY V 1141 US #1 SEBASTIAN FL  
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE VP&D Ramona K. Vickers  
1.2 NAME Apt. 403  
1.3 STREET ADDRESS 414 E. Mountain View Road  
1.4 CITY-ST-ZIP Johnson city, TN 37601  
2.1 TITLE P & D Jack K. Vickers  
2.2 NAME Apt - 403  
2.3 STREET ADDRESS 414 E. Mountain View Road  
2.4 CITY-ST-ZIP Johnson City, TN 37601  
3.1 TITLE S/T&D Michael E. Vickers  
3.2 NAME 949 Fulton Way  
3.3 STREET ADDRESS Sebastian, FL 32958  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
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 *[Signature]* DATE 4-27-98 561913 0547

CP2E037 (10/97)