

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2005 8:00 am
Secretary of State

08-04-2005 90002 041 ****61.25

DOCUMENT # 790791

1. Entity Name
FLORIDA CITRUS NURSERYMEN'S ASSOCIATION



Principal Place of Business
**2686 STATE RD 29 N
IFAS SOUTHWEST CENTER
IMMOKALEE, FL 34142-9515 US**

Mailing Address
**2686 STATE RD 29 N
IMMOKALEE, FL 34142-9515 US**

50059810



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07262005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1055188

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

**ROUSE, ROBERT E
2686 STATE RD 29 N
IFAS SOUTHWEST CENTER
IMMOKALEE, FL 34143**

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

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 September 7, 2005**

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
**V
FARMER, CHARLES
2737 TAYLORE ROAD
BABSON PARK, FL 33827** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**✓ Jim Dilley
PO Box 1666
Avon Park, FL 33825** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
RUCKS, PHIL
P.O. BOX 1304
FROSTPROOF, FL 33843** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Nate Jameson
PO Box 387
Balm, FL 33503** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ROUSE, ROBERT
SWFREC 2686 HIGHWAY 29 NO
IMMOKALEE, FL 341429515** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
FAULKNER, LYNN
PO BOX 12852 N/A
FORT PIERCE, FL 34986** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
Ruth Nowland
PO Box 782
Lithia, FL 33547** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
REED, CHUCK
PO BOX 1863
DUNDEE, FL 33838** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GLADDIS, CLIFF
30 HORN RD
VENUS, FL 33960** ☐ Delete

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

I hereby certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am an officer or director of the corporation and that my name appears in Block 10 or Block 11 if changed or an attachment with an address change is required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or an attachment with an address change is required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or an attachment with an address change is required by Chapter 617, Florida Statutes.

SIGNATURE

Ruth Nowland Treasurer

July 20, 2005

ATTACHMENT

2

Title
Name
Street Address
City-St-Zip

D
Gordon Rasnake
5239 Thornhill Road
Winter Haven, FL 33880

50059810
#790791

Title
Name
Street Address
City-St-Zip

D
Charles Farmer
2737 Taylor Road
Winter Haven, FL 33880