

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 791072**

1. Entity Name

FLORIDA SUGAR MARKETING & TERMINAL ASSN. INC.**FILED****May 12, 2001 8:00 am**
Secretary of State

05-12-2001 90056 035 ****61.25

Principal Place of Business

2655 N OCEAN DR
SUITE 201
RIVIERA BEACH FL 33404
US

Mailing Address

2655 N OCEAN DR
SUITE 201
RIVIERA BEACH FL 33404
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1791586

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

HALE, JOHN
2655 N OCEAN DRIVE
STE 201
RIVIERA BEACH FL 33404

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
VALDIVIA, JOSE
340 ROYAL POINCIANA WAY, #316
PALM BEACH FL ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HALE, JOHN
2655 N OCEAN DRIVE, #201
RIVIERA BEACH FL 33404 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CONTRERAS, ANTONIO
DWEST SUGAR HOUSE RD.
BELLE GLADE FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
FERNANDEZ, LUIS J
340 ROYAL POINCIANA WAY, #316
PALM BEACH FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
TERRILL, JAMES
111 PONCE DE LEON
CLEWISTON FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CARSON, DON
340 ROYAL POINCIANA WAY, #316
PALM BEACH FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
TABERNILLA, ARMANDO
340 ROYAL POINCIANA WAY, #316
PALM BEACH, FL ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CONTRERAS, ANTONIO
1500 WEST SUGAR HOUSE RD.
BELLE GLADE, FL ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
☒ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. Hale

Date

4/24/01

Daytime Phone #

(561) 842-2458

CR2E037 (10/00)