## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED PROFIT** Apr 28 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name F07050 (0) M & M CITRUS, INC. Principal Place of Business Mailing Address 1000 WORLEY ROAD 1000 WORLEY ROAD LAKE PLACID FL \$3852 LAKE PLACID FL 33852 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/26/1980 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 59-2064110 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Country Ζıp Country 8. This corporation owes or has paid the current year Intangible 24 Yes 29 30 Personal Property Tax due June 30. ☐ No g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WORLEY, MICHAEL 1000 WORLEY ROAD Street Address (P.O. Box Number is Not Acceptable) LAKE PLACID FL 33852 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 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, 1 am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and fille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME WORLEY, MIKE 1.2 NAME 1000 WORLEY STREET ADDRESS 1.3 STREET ADDRESS LAKE PLACID FL 33852 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE Addition 2.1 TITLE Channe NAME **WORLEY, PEGGY** 2.2 NAME 1000 WORLEY STREET ADDRESS 2.3 STREET ADDRESS LAKE PLACID FL 33852 CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - ST- ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME

14. Thereby 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address. 4/21/08

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP