FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

SIGNATURE:

F42653

(8)

F.G. "JERRY" MCDONALD PRODUCE CO.										
Principal Place of Business 1400 MARTIN LUTHER KING BLVD PO BOX 756 PLANT CITY FL 33564 Mailing Address 1400 MARTIN LUTHER KING BLVD PO BOX 756 PLANT CITY FL 33564						3. Date incorporated or O. addied 3a. Date of Last Report 02/02/1995				
2. Principal Place of Business 28. Mailing Add			ess			4. FET Number Applied For 59-2 132485 Not Applied For				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional				
22	27	N. 0 O.						Required		
City & State		City & State	28			6. Flection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zıp	Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25	t Bagistared Agent	[30]			Florida Statutes X Yes No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curren	t Registered Agent	··	81	Name	IO. Maine and Address of New 15	og.s.c.ou rigon	·	,	
MCDONALD, MABLE				82	İ	ss (P.Ó. Box Number is Not Acceptable)				
1400 W. MARTIN LUTHER KING BLVD. PLANT CITY FL 33566				83	ļ					
1 CAN	OII I E OOOO		!					T 7.0	Code	
				84	City		FL 85	Zip	Code	
SIGNATURE	Signature, typed or printed name of registered agunt OFFICERS AN		vOTE: Registered 13. 1.11		its prober require	ol who remoting ADDITIONS/CHANGES TO OFF	DATE CERS AND DIRE [] Ch		RS IN 12	
NAME STREET ADDRESS	MCDONALD, STEVE 1902 W SAM ALLEN RD PLANT CITY FL				ADORESS					
CITY-ST-ZIP TITLE	DP DELETE			1.4 CHY-SI-ZIP 2 1 TITEE				ange	Add tion	
NAME	MCDONALD, MABLE 1902 W. SAM ALLEN RD.		22 N	2 NAME						
STREET ADDRESS	PALNT CITY FL		2.3 STREET ADDRESS 2.4 CHY-ST-ZIF							
CITY-ST-ZIP TITLE	DST	3 1 1		JI-ZIF		☐ Ch	ange .	Addition		
NAME	MCDONALD, MARK	☐ DELETE	3 2 N							
STREET ADORESS	1904 W. SAM ALLEN RD.		33 S	TREE	I ADDRESS					
CITY-ST-ZIP	PLANT CITY FL				ST-ZIP		F7) 06		T Addition	
TITLE		☐ DELETE	4 1 1				□ Ch	ange.	Addition	
NAME			4 2 N							
STREET ADDRESS					LADDR(SS					
CITY-ST-ZIP		DELETE	9.4 U		ST-78P		Ch	arige	Addition	
TITLE NAME			52 N				—			
STREET ADDRESS					LADOPESS					
CITY-ST-ZIP			540	11Y - S	ST- 21P					
TITLE			6 1 J	IILE			Change Addition			
NAME			6214	AMÉ						
STREET ADDRESS			635	TREE	I ADDRESS					
CITY-S1-ZIP		Selection of the select			ST-ZIP	for the evaluation stated in Section 110	OZISIJA) Florida	Statut	es Lifuriber	
14. I do hereby certify that oath; that appears in	y certify that the information supplied the information indicated on this ann am an officer or director of the corpo Block 12 or Block 13 f changed, fr	with this tiling is voluntarily to ual report or supplemental ar oration of the regeliver or trus on an attachment will an ad	imished and inual report i tee empowe idress,	is tru red	ue and accurate the	for the exemption stated in Section 119 ate and that my signature shall have the iis report as required by Chapter 697, Fi	same logal effectorida Statutes; a	t as if nd tha	made under at my name	

KG. M (David 1-12-96 813-752-59/5