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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93933

(2)

FLORIDA BLUEBERRIES, INC.

FILED
May 14 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address					, Januar vila laina, sivia laina vilbb illi dibit bibit bibit dibit dibit bibit bibit	
2901 SW ARCHER RD. 2801 SW ARCHE			R RD.			
GAINESVILLE	FL 32608	GAINESVILLE FL 32808	GAINESVILLE FL 32808		DO NOT WRITE IN	THIC COACE
					3. Date Incorporated or Qualified	THIS SPACE
					08/09/1982	
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			59-2218327	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CO 75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	е	City & State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28				Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid	the current year Inlangible
24	25				Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Regis	tered Agent
	imer, Philip I.] {	Name		
2801 \$W ARCHER ROAD				Street /	Address (P.O. Box Number is Not Acceptable)	
GAINESVILLE FL 32608						
			1	13		
			1	4 City		85 Zip Code
		·-·				FL
11. Pursuant t	to the provisions of Sections 607 050: poistered agent, or both, in the State	2 and 607.1508, Flor ida Stat u of Florida, Such cha nce w as	ites, the abo	ove-named	corporation submits this statement for the purporation's board of directors. I bereby accept the	ose 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 607.0505, Florida Statutes						
SIGNATURE						
	Signature, typied or printed name of regulared agree			Agent signature		DATE
TITLE	OFFICERS AND	DELETE	13. 1.1 Tutu	- 1	ADDITIONS/CHANGES TO OFFICER	Change X Addition
	S USKEY, JOHN T	LA DELL'IL			S/T/D	LI GHANGE IX MUNICION
NAME	2801 SW ARCHER ROAD		1.2 NAM	_	Ayoub, Paul	
STREET ADDRESS	GAINESVILLE FL			ET AODRESS	2801 S.W. Archer Road Gainesville FL	
CITY-ST-ZIP TITLE	PD PD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Gainesville FL	Change Addition
NAME	EMMER, PHILIP I		2.2 NAM	Ì		C change C Radinon
STREET ADDRESS	2736 NW 22ND OR					
CITY-ST-ZIP	GAINESVILLE, FL 00000		2.3 STREET AODRESS 2. 4 CITY - ST - ZIP			
TITLE	VSD	X DELETE	3.1 TITL			Change Addition
NAME	RELLER, ROBERT H.		3.2 NAM			
STREET ADDRESS	23331 NW 440 PLACE			ET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL			- \$1 - ZIP		
TITLE	D	☐ DELETE	4.1 TITL		V/D	Change Addition
NAME	EMMER, BARBARA L.		4. 2 NAM		Emmer, Barbara L.	
STREET ADDRESS	2736 NW 22ND DRIVE			ET ADDRESS	2736 N.W. 22nd Drive	
CITY-ST-ZIP	GAINESVILLE FL		•	- ST- ZIP	Gainesville FL	
TITLE	80	DELETE	5.1 TITL		McGriff, Lori E.	Change Addition
NAME	MCGRIFF, LORI E		5.2 NAM	-	4721 N.W. 25th Drive	
STREET ADDRESS	4721 NW 25TH DRIVE		5.3 STRE	ET ADDRESS	Gainesville FL	
CITY-ST-ZIP	GAINESVILLE FL			-ST-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAM	Ε		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY	-ST-ZIP		
14. I hereby c	certify that the information supplied wi	th this filing does not qualify t	for the exen	ption state	ed in Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the information
officer or o	director of the corporation or the race	eiver or trustee empowered to	curate and execute thi	.nai my sigi s report as	mature shall have the same legal effect as if ma required by Chapter 607, Florida Statutes, and	ade under oath; that I am an If that my name appears in
Block 12 d	or Block 13,4 changed, or on an attac	chment with an address.				·