VIA FLORIDA CITRUS, INC.							•		
VIA PLOKIDA GIIROS, INC.					FILED				
					F11				
Principal Place of Business Mailing Address .					01 NOV 27 PN 3: 4	S			
,					SECRETARY OF STATE TALLAHASSEE FLORIDA				
					SECRETARY				
					TALLAHAGOLL				
2. Principal Place of Business 3. Mailing Address									
355 South Ninth Street		P.O. Box 770399							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number		Ar	plied For	1
Winter Garden, FL		Winter Garden, FL			(5,0000000		t Applicable	1	
Zip Country		Zip Country						3.75 Additional Required	
34777-0	0. Name and Address of Current R	34777-0399			7: Name and Address of New Ro		<del></del>	<u> </u>	-
			Name	OT 0-		<b>.</b>	<b>3</b>		1 、
Menendez, Antonio R				CT Corporation System  Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road					
150 W.	Flagler St., Suite 22	00		1200	South Pine Island	Road			
Miami, FL 33130									
	`		City	Dlant	ation	FL	Zip Code	3/ı	1
R The above	named entity submits this statement for	the number of changing its regi					3332		1
o. The above	named entity submits this statement for	the purpose of changing its regi	istereu onice oi	registere	a agent, or boin, in the state of Flor	iua.			
SIGNATURE .	Comis Bours Co	mic Ruen. Social A	Lut. Ser.			//-27-0	0j		
ordin irone .	Signature, typed or printed name of registered agent ar	id title if applicable. (NOTE: Reg	istered Agent signat	cure required v	when reinstating)	DATE			
9. This corpo	oration is eligible to satisfy its Intangible	FILE NOWILL F	EE IS \$150.	00	10. Election Campaign Fina	ancina	<b>\$</b> 5.0	<b>0</b> May Be	
	equirement and elects to do so.	After MAY 1, 2001 I			Trust Fund Contribution			to Fees	
11.	OFFICERS AND E	74. S. A.	12.	1 01 3101	ADDITIONS/CHANGES TO OFFI	CEDS AND	DIRECTOR	S INI 11	-
TITLE	P/D	□X Delete	TITLE	P/D	ADDITIONS/OFFANGES TO OFF	CLII3 AND	☐ Change		<u>6</u>
NAME	Hamon, Michael	222 00000	NAME		ichard Tomlin		_ `		11
STREET ADDRESS	15950 SW Kanner Hwy		STREET ADDRESS	1	South Ninth Street	7 0000			88
CITY-ST-ZIP	Indiantown, FL 34956		CITY-ST-ZIP		er Garden, FL 3477		Change	₩ Addition	CR2E034 (11/00)
TITLE NAME	S/T Taylor, Andrew	🔀 Delete	TITLE NAME	V/D Rand	lal G. Freeman		☐ Change	X Addition	ပြ
STREET ADDRESS	15950 SW Kanner Hwy		STREET ADDRESS		Vestport Road				
CITY-ST-ZIP	Indiantown, FL 34956	<u> </u>	CITY-ST-ZIP	Wilt	on, CT 06897				
TITLE		☐ Delete	TITLE	S	77 1		☐ Change	X Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	!	r Hahn South Ninth Street				
CITY-ST-ZIP			CITY-ST-ZIP		er Garden, FL 3477	7-0399			
TITLE		☐ Delete	TITLE	Т			☐ Change	<b></b> Addition	1
NAME			NAME		el DeLaTorre				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		South Ninth Street er Garden, FL 3477	7-0399			1
DILE			TITLE		or ourder, 12 3177		☐ Change	Addition	1
NAME		□ Ocicie	NAME		3000041	7189	<u>ຼັງຊື່ລື:</u>	1	
STREET ADDRESS			STREET ADDRESS		3000041 -12/11/ ****19	/01 <u></u> 01	10680	902	
CITY-ST-ZIP	1 12.20		CITY-ST-ZIP	-	****[				
TITLE NAME			TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP		***************************************	CITY-ST-ZIP						
13. I hereby o	pertify that the information supplied with to on this report or supplemental report is to	his filing does not qualify for the	exemption stat	ted in Sec	ction 119.07(3)(i), Florida Statutes. i	further certi	fy that the in	formation or director	
of the cor	poration or the receiver of trustee en cov or on an attachment with an address with	vered to execute this report as re	equired by Cha	pter 607,	Florida Statutes; and that my name	appears in	Block 11 or	Block 12 if	
Griangeu,		(1/)							
SIGNAT	URE: 1 . Key / W	L. I	Richard	Tomli	n, President Il/2	26/01 (	<u>(407)</u> (	556-100	Y

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000099

1. Entity Name