2003 FOR PROFIT CORPORATION

FILED Apr 28, 2003 8:00 am Secretary of State

UNIFORM BUSINESS REPORT (UBR)					Secretary of State			
DOCUMENT # F9900000099					7	04-28-2003 909	78 037 ***15	50.00
1. Entity Name								
VIA FLORIDA CITRUS, INC.			∖層		1			
			J					
Principal Plac	ce of Business	Mailing Address			1	•		
355 SOUTH NINTH STREET C/O CORP. TAX					11001009			
WINTER GARI	20 WESTPORT ROAD WILTON, CT 06897-081			11021863				
		wicion, C1 00837-001	•		1188	RISË 1115 1611ë (611 6611) 66111 66111	Rinn = 8 111 - 22 111 - 2 2111	
Principal Place of Business 3. Mailing Address					1 (111			
<u> </u>			And Market		; + +===== + - ==+= + - ==+ ===+ ===+ ===+ ========			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number Applied For				
<u> </u>					<u> </u>	65-0889337	No	ot Applicable
Zip Country		Zip Coun			5. Ce	rtificate of Status Desired	\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent			L. 		7. Na	me and Address of New Regist	<u>-</u>	<u> </u>
Nar				ame				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			S	Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION, FL 33324			<u> </u>					
			0	ity			FL Zip Cod	e
a. The above	named entity submits this statement for	the purpose of changing its	registered o	ffice or register	red agen	t, or both, in the State of Florida.	I am familiar with,	and accept
rue ooliga	tions of registered agent.]
SIGNATURE	Signature, typed by primed name of registered agains an	strike if an aleader (SPOTE	C Basinos at Ass	ntsignature megirec			DATE	
	FILE NOWILL FEE IS \$150.00 FMay 1: 2003 Fee will be \$550.00				ĺ	9. Election Campaign Financin		0 Мау Ве
Make Check	Payable to Florida Department of	State			}	Trust Fund Contribution.	☐ Added	ito Fees
10.			11,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		S IN 11	
TITLE	PD	Oelete	TITLE				🔲 Ç hange	Addition
NAME' STREET ADDRESS	TOMLIN, L. RICHARD 355 SOUTH NINTH STREET		NAME STREET AD	hases				}
CITY ST-ZP			City-st-2					İ
TITLE	VD	☐ Delete	TITLE	_			☐ Change	Addition
NAME	FREEMAN, RANDAL G		NAME					ļ
STREET ADDRESS CITY-ST-2IP	20 WESTPORT ROAD WILTON, CT 068970810		STREET AD CITY-ST-2					į
TITLE	S	☐ Delete	TITLE	····			☐ Change	Addition
NAME	HAHN, PETER	_ oct	NAME				□ o.π.3°	
"STREET ADDRESS			STREET ÂD	1			_	- }
CITY-ST-ZIP	WINTER GARDEN, FL 347770399		CITY-ST-2	:IP				
TITLE NAME	T DELATORRE, DANIEL	Detete	TITLE				☐ Change	Addition
STREET ADDRESS	356 SOUTH NINTH STREET		STREET AD	Dress				
CITY-S1-2P	WINTER GARDEN, FL 347770399)	COTY-ST-Z	IP III				
TITLE		☐ Delete	1MLE	- 1		Secretary	☐ Change	Addition
NAME CROSS ADDRESS			NAME	hnean		Aronoff		
STREET ADDRESS CITY-ST-ZIP			STREET AD City-St-2	1 2 U V	_	ort Road		1
TITLE		☐ Delete	TITLE	 _Wil t	ton,	CT 06897-0810-	☐ Change	Addition
NAME		_ 0000	NAME			•	□ + imigh	
STREET ADDRESS			STREET AD	j j				
CITY-ST-ZP	<u></u>		City-St-2					
12. I hereby of indicated	certify that the information supplied with to on this report or supplemental report is to	his filling does not qualify for the and accurate and that m	the exemption signature :	on stated in Sea shall have the s	ction 119 same leg	I.07(3)(i), Florida Statutes. I furthe al effect as if made under oath; t	er certify that the in hat I am an officer	or director

report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

(203) 761-8242

Carol R. Aronoff 4/21,