## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 29, 2004 8:00 am Secretary of State DOCUMENT # G77339 1. Entity Name 04-29-2004 90217 006 \*\*\*150.00 CITRUS TRUCKING COMPANY Principal Place of Business Mailing Address 1626 90TH AVENUE 1626 90TH AVENUE P.O. BOX 370 VERO BEACH FL 32961 P.O. BOX 370 VERO BEACH FL 32961 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-2354406 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LUTHER, JOHN M Street Address (P.O. Box Number is Not Acceptable) 1626 90TH AVENUE VERO BEACH FL 32966 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) in DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Change XX Addition Director-Asst/Treas. NAME KAHLE, GEORGE A NAME HOPKINSGISUSANOR. Land STREET ADDRESS 6020 SW 5TH STREET STREET ADDRESS T580 Gracewood flane3 CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP Vero Beach, FL 32963 TITLE ☐ Delete TITLE Secretary/Treasurer ☐ Change ★★Addition KAHLE, SANDRA R NAME NAME PEREZ, TOMAS RENE STREET ADDRESS 6020 SW 5TH STREET STREET ADDRESS 2019 Cortez Avenue CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-7iP Vero Beach, FL 32960 TITLE TITI E Delete CHAIRMAN, DIRECTOR Change XAM dilion NAME NAME RICHARDSON, DANFORTH K. HOPKINS, CARTER W STREET ADDRESS 1580 GRACEWOOD LN. STREET ADDRESS 1035 St. James CI CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP Vero Beach, FL 32967 TITLE ☐ Delete TITLE Change ☐ Addition RICHARDSON, MARJORIE H. NAME NAME STREET ADDRESS 1855 28TH AVE. STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32960 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition LUTHER, JOHN M NAME 555 \$ A1A STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Addition LUTHER, NANCY R NAME NAME STREET ADDRESS 555 S A1A HIGHWAY STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this report or supplemental report is fully 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other pkey-mpowered.

SIGNATURE:

/Mes V SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 6, 2004

772-567-1151 Daytime Phon Ext. 333

**FILED**