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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H02167 (5)
1. Corporation Name
CITRUS DEVELOPMENT CORPORATION OF CENTRAL AMERICA
A



Principal Place of Business: 4702 NORTH 23RD ST
P O BOX 1840
MCALLEN TX 78504-4117
Mailing Address: 4702 NORTH 23RD ST
P O BOX 1840
MCALLEN TX 78505-1840
US

3. Date Incorporated or Qualified: 05/04/1984
3a. Date of Last Report: 01/29/1996
4. FEI Number: 59-2433712
Applied For: Not Applicable
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☒ No

2. Principal Place of Business: 21 4200 Unsublg
Suite Apt. # etc.:
22 City & State: McAllen, TX
Zip: 78503 Country: 25
2a. Mailing Address: 26 P.O. Box 1840
Suite, Apt. #, etc.:
27 City & State:
28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
WARREN, JEFFREY W., ESQ.
BUSH ROSS GARDNER WARREN & RUDY, P.A.
220 SOUTH FRANKLIN STREET
TAMPA FL 33602

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83
84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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: (NOTE: Registered Agent: signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	BRAND, OTHAL E., SR.	1.2 NAME	
STREET ADDRESS	4702 NORTH 23RD ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	
NAME	BRAND, OTHAL E JR.	2.2 NAME	
STREET ADDRESS	4702 N 23RD ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	
NAME	FERRELL, LYNN	3.2 NAME	
STREET ADDRESS	4702 N 23RD ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	GOWER, BARBARA	4.2 NAME	
STREET ADDRESS	4702 N. 23RD STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MCALLEN TX	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

OTHAL E. Brand Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/97

(210) 682-6187

Date

Daytime Phone #

CR2E034 (9/96)