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

PROFIT
CORPORATION
ANNUAL REPORT
1997

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H50442

(3)

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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9. Name and Address of Current Registered Agent

BUSBEE TOMATO COMPANY, INC.

25

P. O. BOX 2515	P. O. BOX 2515		
PENSACOLA FL 32513	PENSACOLA FL 32513-2515		
Principal Place of Business	Mailing Address		

## FILED May 15 1997 8:00am Secretary of State



Yes No

6. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

0491209

Not Applicable

06/26/1996

3. Date Incorporated or Qualified

04/03/1985

59-2476591

Florida Statutes

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

Busbee, W. Clyde 136 Siguenza dr. Gulf Breeze fl 32561		Name  Street Address (P.O. Box Number is Not Acceptable)				
						ALPONIC IN LANGUAGE 1 D. ARTICAL.
	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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Separate type-1 or protect have of registered agent and tire if applicable (NOTE: Registered Agent signature regulied when reinstating)  DATE  DATE						
12. OFFICERS AND DIRECTORS 13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
	1 TITLE	Change Add				
RAME BUSBEE, W. CLYDE 12	1.2 NAME					
SIPELY ADDRESS 136 SIGUENZA DR. 13	3 STREET	ADDRESS				
	4 CITY - SI	-ZIP				
THEF VD DELETE 2.6	2.1 TITLE		Change Addition			
** - * ** * * * * * * * * * * * * *	! NAME					
STHEFT ADDRESS 1983 SUMMIT BLVD. 23	2.3 STREET ADDRESS					
CATY STEZIE PENSACOLA FL 32503	4 CITY - S	T-ZIP				
THE VD DELETE 31	1 TITLE		☐ Change ☐ Addition			
NAME BUSBEE, STEVE J 32	2 NAME					
STREET ADDRESS 138 SIGUENZA DR. 3.8	3 STREET	ADDRESS				
CHY-St. 7IP GULF BREEZE FL 32581	3.4. CITY-ST-					
IIII ST DELETE 41	4.5 TITLE		☐ Change ☐ Addition			
NAME BUSBEE, JAN B 4.1	4. 2 NAME					
STREET ADDRESS 136 SIGUENZA DR. 43	4.3 STREET ADDRESS					
GIT STAME GULF BREEZE FL 32561	4 CITY-S	r- ZIP				
TITLE DELETE 51	1 TITLE	-	Change Addition			
SAME 52	NAME					
SHELL ADDRESS 5.3	3 STREET ADORESS					
CHY+S1+70P 54	4 CITY-ST	r-ZiP				
THE DELETE 6.1	1 TITLE		☐ Change ☐ Addition			
NAME 62	2 NAME					
STREET ASTRIBESS 63	3 STREET	REET ADDRESS				
	4 CITY-S					
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 Brock 12 or Block 13 if changed, or on an attachment with an address.						

Country

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