

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H57035 (8)

1. Corporation Name

GULFSTREAM CITRUS SALES, INC.



Principal Place of Business

927 7TH AVE
PO BOX 84
VERO BEACH FL 32961-7084

Mailing Address

927 7TH AVE
PO BOX 84
VERO BEACH FL 32961-7084

3. Date Incorporated or Qualified

05/14/1985

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 1513 E. CAMINO DEL RIO

2a. Mailing Address

26 P.O. Box 89

4. FEI Number

59-2538109

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

City & State

23 VERO BEACH, FL.

City & State

28 VERO BEACH, FL.

Zip

24 32963

Country

25 IND. RIVER

Zip

29 32961

Country

30 IND. RIVER

9. Name and Address of Current Registered Agent

**CONNOLLY, HOWARD
1513 E CAMINO DEL RIO
VERO BEACH FL 32963**

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 607.0507 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

Howard J. Connolly

NOTE: Registered Agent signature required when reinstating

DATE

4/26/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D CONNOLLY, HOWARD J.**
STREET ADDRESS **927 7TH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ DELETE
NAME **PST CONNOLLY, HOWARD J.**
STREET ADDRESS **927 7TH AVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☒ Change ☐ Addition
PRES. CONNOLLY, HOWARD J.
1513 E. CAMINO DEL RIO
VERO BEACH, FL. 32963

☒ Change ☐ Addition
D. CONNOLLY HOWARD J.
1513 E. CAMINO DEL RIO
VERO BEACH, FL. 32963

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Howard J. Connolly, Pres*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/96

407 234-1790
Daytime Phone #

CR2E034 (12/95)