

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 # J14971 (2)

1. Corporation Name

FLORA STAIT CITRUS HAULERS, INC.



Principal Place of Business

4570 2ND STREET
P. O. BOX 572
VERO BEACH FL 32961

Mailing Address

4570 2ND STREET
P. O. BOX 572
VERO BEACH FL 32961

3. Date Incorporated or Qualified
05/16/1986

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 4325 2nd STREET

26 Suite, Apt. #, etc.

22 P.O. BOX 572

27 Suite, Apt. #, etc.

23 City & State
VERO BCH, FL 32961

28 City & State

24 Zip Country

29 Zip Country

25 INDIAN RIVER

30

4. FEI Number

59-2659415

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FANARO, RONALD S.
3621 20TH ST.
VERO BEACH FL 32960

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

Signature typed or printed name of registered agent and then applicant

(If only Registered Agent signature is printed when installing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME ~~P~~
STREET ADDRESS ~~LEE, W. O.~~
CITY - ST - ZIP ~~4570 2ND STREET~~
~~VERO BEACH FL~~

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME P
1.3 STREET ADDRESS BERRY, MICHAEL
1.4 CITY - ST - ZIP 2145 15th AVE
VERO BCH, FL 32960 ☒ Change ☐ Addition

TITLE ☐ DELETE
NAME ~~S~~
STREET ADDRESS BERRY, MICHAEL P
CITY - ST - ZIP 2145 15th AVENUE
VERO BEACH FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME S
2.3 STREET ADDRESS LEE, DEMPSEY
2.4 CITY - ST - ZIP 4570 2nd ST
VERO BCH, FL 32968 ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME ~~VP~~
STREET ADDRESS DEMPSEY, C. L. II
CITY - ST - ZIP 4015 80TH AVENUE
VERO BEACH FL

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

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:

C. Lee Dempsey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Dempsey C. Lee. Sec. Apr. 16, 1996 407
867-1728
Daytime Phone #

CR2E034 (12/95)