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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

VERO BEACH FL 32961

Suite Apt #, etc.

City & State

4325 2ND ST

P O BOX 572

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # J14971** 

(2)

VERO BEACH FL 32981-0572

Mailing Address
4570 2ND STREET

P. O. BOX 572

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FLORA STAIT CITRUS HAULERS, INC.

Country

9. Name and Address of Current Registered Agent

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FANARO, RONALD S. 3621 20TH ST.

VERO BEACH FL 32960

| FILED              |
|--------------------|
| Feb 26 1997 8:00am |
| Secretary of State |

|  | :  |                                    |                                   |  |  |  |  |  |
|--|--|------------------------------------|-----------------------------------|--|--|--|--|--|
|  | 3. Date Incorporated or Qualified 05/16/1986 | 3a. Date of Last Report 04/23/1996 |                                   |  |  |  |  |  |
|  | 4. FEI Number<br>59-2659415                  |                                    | Applied For Not Applicable        |  |  |  |  |  |
|  | 5. Certificate of Status Desired             |                                    | \$8.75 Additional<br>Fee Required |  |  |  |  |  |
|  | 6. Election Campaign Financing               |                                    | \$5.00 May Be                     |  |  |  |  |  |

This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent

Added to Fees

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

É HARIHAN OLDY HIBY DIGIN TARAK PAGOLHADI BARKI BIRKI DIGIN DIGIN DIGIN DIGIN DIGIN BIRKI BIRKI HODI

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

Country

81 Name

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| agent. I a      | im familiar with, and accept the obligations of, Section 607                 | .0505, Florid | ia Statutes.              | Cidio i a bodio di c     | andotors i noteby bootpt               | no appointment as | - Photosco |
|-----------------|--|---------------|---------------------------|--------------------------|--|-------------------|------------|
| SIGNATURE       | Signature: typed or printed nume of registered agont and title if applicable | (NOTE: B      | egistered Agent signature | required when remaining) | · · · · · · · · · · · · · · · · · · ·  | DATE              |            |
| 12.             | OFFICERS AND DIRECTORS   | (1012.11      | 13.                       |                          | NS/CHANGES TO OFFICE                   |                   | S IN 12    |
| THILE           | <b>P</b>   | ELETE         | 1.1 TITLE                 |                          | ······································ | ☐ Change          | Addition   |
| NAME            | BERRY, MICHAEL   |               | 1.2 NAME                  | ** •                     |  |                   |            |
| STREET ADORESS  | 2145 15THA VE  |               | 1.3 STREET ADDRESS        | •                        |  |                   |            |
| City-St ZiP     | VERO BEACH FL  |               | 1.4 CITY-ST-ZIP           |                          |  |                   |            |
| TITLE           | <b>S</b> □ [   | ELETE         | 2.1 TITLE                 |                          | · · · · · · · · · · · · · · · · · · ·  | ☐ Change          | Addition   |
| NAME            | LEE, DEMPSEY   |               | 2.2 NAME                  |                          |  | 3º 20             |            |
| STREET ADDRESS  | 4570 2ND ST  |               | 2.3 STREET ADDRESS        |                          |  |                   |            |
| CITY-ST-7/P     | VERO BEACH FL  |               | 2 4 CITY-ST-ZIP           |                          |  |                   |            |
| 1/TLF           |  | DELETE .      | 31 TITLE                  |                          | ·                                      | ☐ Change          | Addition   |
| NAME            |  |               | 32 NAME                   | 7.                       |  |                   |            |
| STREET ADDRESS  |  |               | 33 STREET ADDRESS         |                          |  |                   |            |
| City-St-7/P     |  |               | 34. CITY-SY-ZIP           |                          |  |                   |            |
| TITLE           |  | )ELETE        | 4.1 TITLE                 |                          |  | Change            | Addition   |
| NAME            |  |               | 4. 2 NAME                 |                          |  |                   |            |
| STREET ADDRESS  |  |               | 4.3 STREET ADDRESS        |                          |  |                   |            |
| CITY-ST-ZIP     |  |               | 4.4 CITY-ST-ZIP           |                          |  |                   |            |
| TILLE           |  | DELETE        | 5.1 TITLE                 | 1 1                      |  | Change            | Addition   |
| NAME            |  |               | 5.2 NAME                  |                          |  | •                 |            |
| STREET ADDRESS  |  |               | 5.3 STREET ADDRESS        | 1                        | •                                      |                   |            |
| C(₹Y+S1+Z(P     |  |               | 5.4 CITY-ST-ZIP           |                          |  |                   |            |
| TITLE           |  | DELETE        | 6.1 TITLE                 |                          |  | ☐ Change          | Addition   |
| NAME            |  |               | 6.2 NAME                  |                          |  |                   |            |
| STREET ADDRESS  |  |               | 6.3 STREET ADDRESS        |                          |  |                   |            |
| CITY - ST - ZIP |  |               | 6 4 CITY - ST - 7IP       |                          |  |                   |            |

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:

THE AND YES OBSERINTED HAVE OF SIGNING OFFICER OF DIRECTOR

Jeb-18, 1997

567-1728