SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (9)J38285 SAND HILL CITRUS, INC. Principal Place of Business Mailing Address 70 COLONY DRIVE NORTH 70 COLONY DRIVE NORTH **ELLENTON FL 34222** ELLENTON FL 34222 3a. Date of Last Report 3. Date incorporated or Qualified 10/17/1986 04/14/1995 4. FEI Number Applied For 2a. Maiting Address 2. Principal Place of Business No CHWCK Not Applicable 59-2723308 70 Creary DRIVE NORT 126 \$8.75 Additional Suite, Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required NA NIA City & State City & State 6. Election Campaign Financing \$5.00 May Be ELLEN TO Trust Fund Contribution Added to Fees 28 8. This corporation has liability for intangible tax under s. 199 032. • Zip Country Yes 🔀 No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name No CHANGE GERWITZ, HOWARD C. Street Address (P.O. Box Number is Not Acceptable) 70 COLONY DRIVE NORTH 82 **ELLENTON 34222** 83 85 Zip Code 84 City 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 decept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signative, typed or proted name of registered agent and title if applicable (NOTE: Registered Agent signature required when revostating) (3/96)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1 t Tille TITLE CR2E034 1.2 NAME GERWITZ, HOWARD NAME 70 COLONY DRIVE NORTH 1,3 STREET ADDRESS STREET ADDRESS **ELLENTON FL** 1.4 CHTY - ST - ZIP CITY-ST-ZiP Change Addition DELETE 2.1 TIFLE TITLE 2.2 NAME GERWITZ, DAVID NAME **ROUTE #5, BOX 1100** 23 STREET ADDRESS STREET ADDRESS **GLOUCESTER VA** 2 4 CiTY - ST - ZIP CITY - ST - ZIP Change DVP DELETE 3 1 TITLE TITLE 3.2 NAME D'ANGELO, DENNIS NAME 412 RUGBY RD 3.3 STREET ADDRESS STREET ADDRESS CEDARHURST NY 3.4 CITY - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TIFLE TITLE 4 2 NAME KESTER, MILES NAME STREET ADDRESS 1701 18TH AVE W. 4.3 STREET ADDRESS BRADENTON FL 4 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE 5.2 NAMS NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHTY - \$1 - ZIP CITY - \$1 - ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6 4 CHY - ST - 74P CHY-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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD C. GERWITZ

7-10-96 941 -722 0725