FOR PROFIT CORPORATION

2002 8:00 am

	MITURM BUSINE		(nRK)		Constant of State		
DOCUMENT# J 30285					Secretary of State		
1. Entity Name SAND HILL CITRUS, INC.				l	05-24-2002 91348 011 ***150.00		
· ·	•						
							
}							
 	DO NOT WRITE	IN THIS SF	PACE				
	Place of Business	3. Mailing Address	\				
		70 Corony D			DO NOT MIDITE IN THE COLOR		
		Cuito, 7 pt. 11, ctc.			DO NOT WRITE IN THIS SPACE		
City & Sta	NTON FL.	City & State	FL.	4	4. FEI Number Applied For 59 - 2.7 2.3 3 0 8 Not Applied		
Zip	222 Country MANATTEC	Zip	Country	_	5. Certificate of Status Desired \$8.75 Additional	<u>Die</u>	
					Fee Required Name and Address of Current Registered Agent	\dashv	
				HOWARD GERWITZ			
Street Address				dress (P.O	D. Box Number is Not Acceptable) -		
	IN-THIS-SP	ACE	10 C	<i>.040</i> n	MY DRIVE NORTH	===	
•			City		,	_	
			ON E	LLE.	NTON FL 31p Code 34222		
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or re	egistered a	agent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signature	required whe	en reinstating) DATE	}	
9. This corpo	oration is eligible to satisfy its Intangible	January 1 - Ma	y 1 Fee is \$150.		DATE	-	
Tax filing r	requirement and elects to do so.	After May 1	, Fee is \$550.00 UBR is \$61.25		10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be	, }	
	ria on back)	Make Check Payable		of State	Irust Fund Contribution.	ļ	
11.	OFFICERS AND D	IRECTORS	TIRE			\exists_z	
NAME	GERWITZ, HONA	2 D	TITLE NAME			70.	
STREET ADDRESS	70 COLONY DR N. ELLENTON FL 3.		STREET ADDRESS			2	
CITY-ST-ZIP		4222	CITY-ST-ZIP	····		{ }	
TITLE NAME	GERWITZ, DAVID		TITLE NAME				
STREET ADDRESS	RTOS BOX 1100		STREET ADDRESS			ا	
CITY-ST-ZIP	GLOUCESTER, VA,		CITY-ST-ZIP				
TITLE NAME	DY D'ANGELO, DENNIS 412 RUGBY RD	(TITLE				
STREET ADDRESS	412 RUGBY RD		NAME STREET ADDRESS				
CITY-ST-ZIP	CEDAR HURST, NY	11576	CITY-ST-ZIP		DO NOT WRITE	_	
THTLE	DB		TITLE		IN THIS SPACE		
NAME KESTER MILES STREET ADDRESS 4525 77TH STOE,		NAME		IN THIS SPACE			
CITY-ST-ZIP	PALMETTO, FL. 342	21	STREET ADDRESS CITY-ST-ZIP				
TITLE			TITLE			\dashv	
NAME			NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS				
TITLE	11.	······································	CITY-ST-ZIP				
NAME			TITLE				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
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I 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered. HOWARD GERWITZ REGISTERED ABENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 2002 941-722 0725

Daytime Phone #