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**PROFIT** CORPORATION ANNUAL REPORT



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

1996

(6)

1. Corporation Name  NANCY'S PRODUCE COMPANY  Principal Place of Business  # ELLEN M. MADDOX 8203 GLADIOLUS DR  8203 GLADIOLUS DR								
8203 GLADIO FT MYERS F		8203 GLADIOLUS DR FT MYERS FL 33908			Date Incorporated or Qualified			
					05/04/1987	03/	/21/1995	5
t. Principal Place of Business		2a. Mailing Address 26	26		4. FEt Number 59-2813122	Applied For Not Applicable		
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
City & State	9	City & State			6. Election Campaign Financing		\$5.00	<del></del>
3		28	<del></del>		Trust Fund Contribution		Added 1	
Ζίρ <b>4</b>	Country 25	Zip <b>29</b>	30	ntry	8. This corporation has liability to Florida Statutes	r intangible tax es	unders 1	99.032,
	9. Name and Address of Cu	rrent Registered Agent		D4   \	10. Name and Address of New	Registered A	gent	
MADDO	X, ELLEN M.		]	81 Name				
	LADIOLUS DR		82 Stree		ress (P.O. Box Number is Not Accepta	ible)		
FT. MYE	ERS FL 33908			83				
				84 City			85 Zip (	Code
44 D	007.6	0500 1007 4500 51-11-01-1			ration submits this statement for the p	FL	'	
or register	ed agent, or both, in the State of I th, and accept the obligations of, S	Florida. Such change was authoriz Section 607.0505, Florida Statutes	red by the a	orporation's boa	ird of directors. I hereby accept the ap	pointment as re	egistered a	igent Lam
	Carachina has ad as adapta assess of some total	The state of the s						
12.	Signature, typed or printed name of registered OFFICERS	agent and title if an eleable (FI)  S AND DIRECTORS	OTE: Begistered	Ay of signature require		DATE FICERS AND E	DIRECTOR	S IN 12
······	DPS OFFICERS				al when unclaings ADDITIONS/CHANGES TO OF	FICERS AND E		S IN 12
12. TILLE NAME	OFFICERS DPS MADDOX, ELLEN	AND DIRECTORS	13.	TLF		FICERS AND E		
TITLE NAME STREET ADORESS	DPS OFFICERS MADDOX, ELLEN 4975 DEAN ST.	AND DIRECTORS	13. 1 1 II 1 2 NA 1.3 SI	TLE ME REET ADDRESS		FICERS AND E		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	OFFICERS DPS MADDOX, ELLEN	S AND DIRECTORS  DELETE	13. 1 1 II 12 NA 1.3 SI 14 C/	TLF ME REET ADDRESS Y-ST-ZIP		FICERS AND E	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DPS OFFICERS MADDOX, ELLEN 4975 DEAN ST.	AND DIRECTORS	13. 1 1 11 12 NA 13 SI 14 C	TLE ME REET ADDRESS Y-SI-ZIP ILE		FICERS AND E	Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPS MADDOX, ELLEN 4975 DEAN ST. FT. MYERS FL T MADDOX, ELLEN 4975 DEAN ST.	S AND DIRECTORS  DELETE	13. 1 1 II 12 NA 1.3 SI 14 CF 2 1 Tr 2.2 NA	TLE ME REET ADDRESS Y-SI-ZIP ILE		FICERS AND E	Change	Addition
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cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chanter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Ellen Maddox, Presidedr

SIGNATURE: SIGNATURE: SIGNATURE, AND TYPEO OR PRINTED NAME OF SIGNING OF ICER OR DIRECTOR

3/22/96 9414821937