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Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J72010** (8)

1. Corporation Name
ZELLWOOD CARROT PRODUCTS, INC.

Principal Place of Business
**P.O. BOX 188
6161 W. JONES AVENUE
ZELLWOOD FL 32788**

Mailing Address
**P.O. BOX 188
6161 W. JONES AVENUE
ZELLWOOD FL 32788-0188**



3. Date Incorporated or Qualified **05/11/1987** 3a. Date of Last Report **01/22/1996**

4. FEI Number **59-2818567** 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

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**O'DONNELL, JAMES D.
1648 OSCEOLA STREET
JACKSONVILLE FL 32204**

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	JORGENSEN, MARGARET	
STREET ADDRESS	1750 SUSSEX DR.	
CITY-ST-ZIP	MT.DORA FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	JORGENSEN, KENNETH F.	
STREET ADDRESS	1750 SUSSEX DR.	
CITY-ST-ZIP	MT.DORA FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	STALEY, JAMES M.	
STREET ADDRESS	2103 DOGWOOD CIRCLE	
CITY-ST-ZIP	MT.DORA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ROGERS, GLENN R.	
STREET ADDRESS	2245 MORNINGSIDE DR.	
CITY-ST-ZIP	MT.DORA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	KENNEDY, CHARLES W.	
STREET ADDRESS	1111 AVALON WAY	
CITY-ST-ZIP	MT.DORA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	YOUNGS, THOMAS L.	
STREET ADDRESS	1450 RAINTREE LANE	
CITY-ST-ZIP	MT.DORA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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:

K.F. Jorgensen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth F. Jorgensen 1/9/97 (407) 886-1891

Date Daytime Phone #

CR2E034 (9/96)