2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 04, 2004 08:00 AM **Secretary of State** DOCUMENT # K37312 1. Entity Name GEORGE M. BEUTTELL CITRUS, INC. Principal Place of Business Mailing Address 1850 43RD AVE., C-11 1850 43RD AVE., C-11 P.O. BOX 2369 P.O. BOX 2369 VERO BCH, FL 32961-9369 VERO BCH, FL 32961-9369 01222004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0078428 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEUTTELL, GEORGE M. DO NOT WRITE 132 43RD AVE S.W. VERO BCH, FL 32962 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BEUTTELL, GEORGE M. NAME 1850 43RD AVE C-11 STREET ADDRESS VERO BCH, FL CITY-ST-ZIP TITLE U000000036888 MAME 02/06/04-80076-015 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY -ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY -ST-ZIP TITLE

12. 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 trusteg empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachme

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED