## 2006 FOR PROFIT CORPORATION

## Mar 28, 2006 8:00 am Secretary of State **ANNUAL REPORT** 03-28-2006 90133 015 \*\*\*150.00 DOCUMENT #K37312 1. Entity Name GEORGE M. BEUTTELL CITRUS, INC. Principal Place of Business Mailing Address 50006412 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 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02162006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 65-0078428 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BEUTTELL, GEORGE M. 132 43RD AVE G.W. 1850 - 43+2 AVE, C-11 Street Address (P.O. Box Number is Not Acceptable) VERO BCH, FL 32967 32966 City Zip Code 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 \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete MLE ☐ Change Addition BEUTTELL, GEORGE M. NAME NAME STREET ADDRESS 1850 43RD AVE C-11 STREET ADDRESS VERO BCH, FL CITY+ST-7/P CHY-ST-7P ☐ Delete ☐ Change MILE IIILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete IIILE ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with air againsts with air againsts with air againsts with air againsts. changed, or on an attaching

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ACCRESS

FILED