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Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # K97215 (3)
1. Corporation Name
VENUS CITRUS GROVES, INC.



Principal Place of Business
2200 CORPORATE BLVD., N.W., SUITE 401
BOCA RATON FL 33431

Mailing Address
1114 DE LUSSAN LANE
~~BOX 403-27~~
SUMMERLAND KEY FL 33042
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 1114 DELUSSAN LANE
Suite, Apt. #, etc.
22
City & State SUMMERLAND KEY
23 FLORIDA
Zip 33042 Country MONROE
24 25 US 29 33042 30 US

2a. Mailing Address
26 1114 DELUSSAN LANE
Suite, Apt. #, etc.
27
City & State SUMMERLAND KEY FL.
28
Zip 33042 Country US
29 33042 30 US

3. Date Incorporated or Qualified
06/20/1989

4. FEI Number
58-1859933

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
HCRM CORP
2200 CORPORATE BLVD., N.W., SUITE 401
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name JAMES L. SCHNEIDER
82 Street Address (P.O. Box Number is Not Acceptable)
1114 DELUSSAN LANE
83
84 City SUMMERLAND KEY, FL 85 Zip Code 33042

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

James L. Schneider

04-15-98

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE D
NAME SCHNEIDER, JAMES L.
STREET ADDRESS 1114 DE LUSSAN LANE
CITY-ST-ZIP SUMMERLAND KEY FL 33042-4322

TITLE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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:

James L. Schneider President 4-02-98 305-445-8797

CR2E034 (10/97)