FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mar 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L02754 (4)PANHANDLE GROWERS INCORPORATED Principal Place of Business Mailing Addross 5975 SOUTHRIDGE DRIVE 5975 SOUTHRIDGE DRIVE MILTON FL 32570-9535 MILTON FL 32570-9535 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 07/17/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 5915 SOUTHRIDGE DRWE SAME 59-2969323 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing MILTON, FLORIDA 28 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 25 SANTA RODA 29 Personal Property Tax due June 30. Yes Yes X) No 30 10. Name and Address of New Registered Agent **Current Registered Agent** 81 Name ACKERMAN, KENNETH J. 514 N BAYLEN ST 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32501 **R3** 84 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 Signature, typed or profed name of regetimed agent and title dispelicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE ☐ Change ☐ Addition TITLE DAVY, JOHN M. NAME 1.2 NAME 5527 OAKMONT DRIVE STREET ADORESS 1.3 STREET ADDRESS PACE FL 1.4 CITY-ST-ZIP CITY-ST-7/P DELETE Change Addition TITLE 21 TITLE STRANGE, GLEN B. NAME 2.2 NAM8 4703 CHRISTY DR STREET ADORESS 2.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change □ Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS SYREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6 1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

JOYN M. DAVY

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 conversion 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 charling or on an attachment with an address.

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED

03/06/98 850-6260951