

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAY 25 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L99000004114

1. Entity Name

FLORIDA CITRUS PARTNERS, L.L.C.

Principal Place of Business

1900 OLD DIXIE HWY  
FORT PIERCE FL 34946

Mailing Address

1900 OLD DIXIE HWY  
FORT PIERCE FL 34946-1423

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0953645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREWTON, WILBUR E  
225 SOUTH ADAMS STREET  
SUITE 250  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME DAVIS, PAMELA JO  
STREET ADDRESS 12425 28TH STREET NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE VP, Mgr ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Delete  
NAME NELSON, GREGORY P  
STREET ADDRESS 1900 OLD DIXIE HWY  
CITY-ST-ZIP FORT PIERCE FL 34946

TITLE P, Mgr ☒ Change ☐ Addition  
NAME 9000003289879--4  
STREET ADDRESS -06/14/00--01113--002  
CITY-ST-ZIP \*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S, Mgr ☐ Change ☒ Addition  
NAME Harrell, Mike  
STREET ADDRESS 12425 28th Street North  
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T, Mgr ☐ Change ☒ Addition  
NAME Reed, Glen W  
STREET ADDRESS 1900-Old Dixie Highway  
CITY-ST-ZIP Fort Pierce, FL 34946

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

*Gregory P. Nelson*  
Gregory P. Nelson, President

(561) 465-7555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/9/01)