

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **M89753** (1)
1. Corporation Name
BARNES CITRUS ENTERPRISES, INC.

Principal Place of Business Mailing Address
**ORANGE AVE ASSN
HWY 68
FT PIERCE FL 32789
US** **921 VIRGINIA DR
WINTER PARK FL 32789-5907
US**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -5 PM 1:56

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		07/11/1988	02/17/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		59-2907546	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		☐	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	☐	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

**BARNES, GLEN A.
921 VIRGINIA DRIVE
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 85. 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, typewritten or printed name of registered agent and date of application) (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, GLEN A.	1.2 NAME	
STREET ADDRESS	921 VIRGINIA DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	1.4 CITY - ST - ZIP	
TITLE	DT	2.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, SELMA N.	2.2 NAME	
STREET ADDRESS	921 VIRGINIA DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	2.4 CITY - ST - ZIP	
TITLE	DV	3.1 TITLE	☒ Change ☐ Addition
NAME	BARNES, GLEN A., JR.	3.2 NAME	
STREET ADDRESS	9855-4 ESTUARY WAY	3.3 STREET ADDRESS	980 FRANCISCAN DRIVE
CITY - ST - ZIP	SEBASTIAN, FL 32958	3.4 CITY - ST - ZIP	SEBASTIAN, FL 32958
TITLE	DV	4.1 TITLE	☐ Change ☐ Addition
NAME	NELSON, RALPH	4.2 NAME	
STREET ADDRESS	2250 SIXTH ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	VERO BEACH FL	4.4 CITY - ST - ZIP	
TITLE	DS	5.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, WILLIAM N.	5.2 NAME	
STREET ADDRESS	3028 SHERWOOD RD	5.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 of this report, or on an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-95 407-6871576