

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2002 8:00 am**  
**Secretary of State**

01-27-2002 90037 004 \*\*\*\*50.00

**DOCUMENT # M99000001259**

1. Entity Name

**SFE CITRUS GP, LLC**

Principal Place of Business

**C/O PASCO ACQUISITION  
 400 NORTH TAMPA STREET  
 TAMPA FL 33602**

Mailing Address

**C/O PASCO ACQUISITION  
 400 NORTH TAMPA STREET  
 TAMPA FL 33602**

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 **59-3583659**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DOLINER, NATHANIEL L ESQUIRE  
 % CARLTON FIELDS  
 777 S. HARBOUR ISLAND BLVD.  
 TAMPA FL 33602**

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**  
**Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**MGRM  
 TEGREENE, DAVID  
 250 BRIGHAM ROAD  
 WINTER HAVEN FL 33881** ☒ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**MGRM  
 NORBERG, ROBERT  
 1251 PRISTINE PLACE  
 LUTZ FL 33549** ☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**MGRM  
 PEISER, ROBERT A  
 326 LAKEWOOD DRIVE  
 BLOOMFIELD HILLS MI 48304** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**831 NORMANDY TRACE ROAD  
 TAMPA, FL 33602** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

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:**

**SIGNATURE REQUIRED**

**A PEISER, MANAGER**

**1/9/2002 877 595 3727**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

Attachment  
910632

**SFE CITRUS GP, LLC**  
400 North Tampa Street  
Tampa FL 33602

**Federal Identification #**  
**59-3583659**

**Date of Incorporation**  
**June 25, 1999**

Document # ~~M99000001259~~  
Telephone # 813-273-4641  
Fax # 813-273-5380

**State of Incorporation**  
**Delaware**

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TITLE	NAME	ADDRESS
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**OFFICERS**

CEO	ROBERT A PEISER	831 Normandy Trace Road, Tampa, FL 33602
P COO	LAWRENCE HIGGINS	758 Inverness Drive, West Chester, PA 19380
VP & CFO	GARY VILJOEN	13060 Sanctuary Cove Dr., Temple Terrace FL 33637
VP HR	LOUIS J BOUISSON	5521 Pinnacle Heights Circle, Tampa FL 33624
VP CAO Treasurer	KIMBERLY JOHNSON	4514 Ferncroft Circle, Tampa FL 33629
Secretary	RHIANNON KUBICKA	29 Avenue B, New York NY 10009

**MANAGERS**

ROBERT A PEISER	730 Coral Reef Drive, Tampa, FL 33602
ROBERT NORBERG	1251 Pristine Place, Lutz 33549