

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000857

FILED
May 01, 2003
Secretary of State

Entity Name: IMG CITRUS COOPERATIVE, INC.

Current Principal Place of Business:

2600 45TH STREET
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

2600 45TH STREET
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERMAN, TYSON R
2300 45TH STREET
VERO BEACH, FL 32967 US

Name and Address of New Registered Agent:

SALLIN, MELANIE
2300 45TH STREET
VERO BEACH, FL 32967 US

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: MELANIE SALLIN

05/01/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARTON, ED
Address: 2300 45TH STREET
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: SHERMAN, TYSON
Address: 2300 45TH STREET
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: HURLEY, THOMAS
Address: 660 BEACHLAND BLVD., SUITE 201
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARTON, ED
Address: 2600 45TH STREET
City-St-Zip: VERO BEACH, FL 32967

Title: D (X) Change () Addition
Name: SALLIN, MELANIE
Address: 2600 45TH STREET
City-St-Zip: VERO BEACH, FL 32967

Title: D (X) Change () Addition
Name: SALLIN, MICHEL A
Address: 7836 CHERRY LAKE ROAD
City-St-Zip: GROVELAND, FL 34736

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELANIE SALLIN

D

05/01/2003

Electronic Signature of Signing Officer or Director

Date