
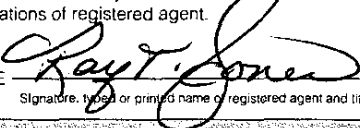
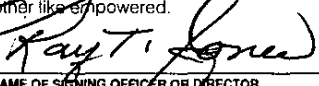


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90031 007 ****61.25

DOCUMENT # N19354 1. Entity Name THE RARE FRUIT COUNCIL INTERNATIONAL, INC. MANATEE COUNTY CHAPTER					
Principal Place of Business P.O. BOX 1656 BRADENTON FL 34206			Mailing Address P.O. BOX 1656 BRADENTON FL 34206		
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 65-0220160	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JONES, RAY T. 336 49 STREET, WEST PALMETTO FL 34221			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		(NOTE: Registered Agent signature required when reinstating)		DATE <div style="text-align: right;">3/8/04</div>	
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JASTER, MICHAEL V		NAME	RAY T. JONES	
STREET ADDRESS	6707 12TH AVE NW		STREET ADDRESS	336 49 ST. W	
CITY-ST-ZIP	BRADENTON FL 34209		CITY-ST-ZIP	PALMETTO FL. 34221	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAY, PETER C		NAME	DAVID HARTMANN	
STREET ADDRESS	9603 25 ST E		STREET ADDRESS	1100 YALE AVE.	
CITY-ST-ZIP	PARRISH FL 34219		CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMPSON, BRUCE&DONNA		NAME	SPENCER SALSER	
STREET ADDRESS	8502-25 STE		STREET ADDRESS	3026 SAFFOLD RD.	
CITY-ST-ZIP	PARRISH FL 34219		CITY-ST-ZIP	WIMAUMA FL. 33598	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAVALLEY, DAN		NAME	DAN LAVALLEY	
STREET ADDRESS	610 MANATEE DR SW		STREET ADDRESS	610 MANATEE AVE. DR. SW	
CITY-ST-ZIP	RUSKIN FL 33570		CITY-ST-ZIP	RUSKIN FL 33570	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. 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 or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		DATE: 3/8/04		DAYTIME PHONE #: 941-729-5985	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					