

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32549

FILED
Apr 16, 2010
Secretary of State

Entity Name: TROPICAL FRUIT & VEGETABLE SOCIETY OF THE REDLAND, INC.

Current Principal Place of Business:

24801 SW 187 AVE
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

24801 SW 187 AVE
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 59-2527607 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PROBINSKY, BRENT L.
3414 MAGIC OAK LANE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LOPEZ, MARYELLEN C
Address: 15921 S.W. 287 STREET
City-St-Zip: HOMESTEAD, FL 33033

Title: V
Name: GUILLEN, LOLLY
Address: 35821 S.W. 218 AVENUE
City-St-Zip: MIAMI, FL 33030

Title: T
Name: LOPEZ, MICHAEL
Address: 15921 S.W. 287 STREET
City-St-Zip: MIAMI, FL 33033

Title: S
Name: FREIRE, FERNANDO
Address: 21350 S.W. 315 TERRACE
City-St-Zip: MIAMI, FL 33030

Title: D
Name: ROMNEY, DAVID
Address: 26021 S.W. 199 AVENUE
City-St-Zip: HOMESTEAD, FL 33031

Title: D
Name: HIND, CHRIS
Address: 934 N.E. 42 TERRACE
City-St-Zip: HOMESTEAD, FL 33033

I hereby 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 all other like empowered.

SIGNATURE: MARYELLEN COX LOPEZ

P

04/16/2010

Electronic Signature of Signing Officer or Director

Date