

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90065 006 ****61.25

0088303

DOCUMENT # N37316

1. Entity Name

SPRING HILL CHAPTER OF RARE FRUIT COUNCIL INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

**13090 CENTENNIAL STREET
 SPRINGHILL FL 34609
 US**

**13090 CENTENNIAL STREET
 SPRING HILL FL 34609
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FREDERICK, EDWARD
 13090 CENTENNIAL STREET
 SPRING HILL FL 34609**

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 \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☐ Delete
 NAME **RITTER, LORRAINE**
 STREET ADDRESS **10283 BEDFORD ROAD**
 CITY-ST-ZIP **SPRING HILL FL 34608**

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

TITLE **DS** ☐ Delete
 NAME **VIRGINIA, MALE**
 STREET ADDRESS **4355 CULBREATHCO**
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

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

TITLE **DV** ☐ Delete
 NAME **PERKINS, GISELE**
 STREET ADDRESS **8088 SPANISH OAK DRIVE**
 CITY-ST-ZIP **SPRINGHILL FL 34608**

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

TITLE **DT** ☐ Delete
 NAME **FREDERICK, EDWARD**
 STREET ADDRESS **13090 CENTENNIAL ST**
 CITY-ST-ZIP **SPRINGHILL FL**

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

TITLE **DD** ☐ Delete
 NAME **PERNA, CHUCK**
 STREET ADDRESS **5015 CHAMBERS CT**
 CITY-ST-ZIP **SIRING HILL FL 34609**

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

TITLE **DD** ☐ Delete
 NAME **HEDSTRAND, ART**
 STREET ADDRESS **28390 OLD TRILBY RD**
 CITY-ST-ZIP **BROOKSVILLE FL 34602**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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: *Edward Frederick*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-02 352-686-7848

Date

Daytime Phone #

CR2E037 (9/01)