

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N37643**

1. Entity Name

**GADSDEN COUNTY TOMATO GROWERS ASSOCIATION, INC.****FILED**  
**Feb 15, 2002 8:00 am**  
**Secretary of State**

02-15-2002 90018 048 \*\*\*\*61.25

Principal Place of Business

2140 W. JEFFERSON ST.  
QUINCY FL 32351  
US

Mailing Address

2140 W JEFFERSON STREET  
QUINCY FL 32351  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-2901686**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**CASTRO, BEN F.**  
**2140 W. JEFFERSON STREET**  
**QUINCY FL 32351**

7. Name and Address of New Registered Agent

Name

**Henry G. Grant**

Street Address (P.O. Box Number is Not Acceptable)

**2140 W. Jefferson St.**

City

**Quincy****FL**

Zip Code

**32351**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	MAXWELL, WILL	218 W GRAVES ST	QUINCY FL	
D	SUBER, HARVEY	215 W JEFFERSON ST	QUINCY FL	
ST	GRANT, HERNY G	2140 W JEFFERSON ST	QUINCY FL 32351	
D	SMITH, THOMAS	RT 1 BOX 129	QUINCY FL	
D	DAUGHTREY, TOM	HWY. 41, NORTH	CECIL GA	
D	VANLANDINGHAM, RICK	RT 1 BOX 322 Z	QUINCY FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	Smith, Thomas	9540 Flat Creek Rd	Quincy, FL 32351	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D	VanLandingham, Rick	2618 Bristol Hwy.	Quincy, FL 32351	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**Henry G. Grant****1/30/02****(850) 875-7255**

Date

Daytime Phone #

CR2E037 (9/01)