

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90398 025 ****61.25

DOCUMENT # N99000004403

1. Entity Name

SOUTHEAST PRODUCE COUNCIL, INC.

Principal Place of Business

Mailing Address

2922 -112TH TERR EAST
PARRISH FL 34219

2922 -112TH TERR EAST
PARRISH FL 34219

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

59-3588273

Applied For

Not Applicable

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

VORHEES, TERRY
2328 ROTHENFELD COURT
LAND O'LAKES FL 34639

Name

Terry Vorhees

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

2922 112th Terrace East

City

Parrish

FL

Zip Code
34219

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 MT
NAME VORHEES, TERRY
STREET ADDRESS 2328 ROTHENFELD COURT
CITY-ST-ZIP LAND O'LAKES FL 34639 ☐ Delete

TITLE MT
NAME Terry Vorhees ☒ Change ☐ Addition
STREET ADDRESS 2922 112th Terrace East
CITY-ST-ZIP Parrish, FL 34219

TITLE P
NAME HILTON, MARK
STREET ADDRESS HWY 74 EAST
CITY-ST-ZIP INDIAN TRAIL NC 28079 ☐ Delete

TITLE Vice-President
NAME Larry Norwood ☐ Change ☒ Addition
STREET ADDRESS 148 Riverview Park
CITY-ST-ZIP Jackson, GA 30233

TITLE D
NAME WATSON, WILLIAM
STREET ADDRESS 3113 LAWTON RD., #225
CITY-ST-ZIP ORLANDO FL 32803 ☐ Delete

TITLE D
NAME Mr. Carroll Todd ☐ Change ☒ Addition
STREET ADDRESS 5501 Fulton Industrial Blvd.
CITY-ST-ZIP Atlanta, GA 30336

TITLE S
NAME EUBANKS, MARTIN
STREET ADDRESS P.O. BOX 11280
CITY-ST-ZIP COLUMBIA SC 29211 ☐ Delete

TITLE D
NAME Mr. Tom Page ☐ Change ☒ Addition
STREET ADDRESS 3003 S. Florida Ave.
CITY-ST-ZIP Suite 202 Lakeland, FL 33803

TITLE D
NAME CARTER, DEAN
STREET ADDRESS 2175 PARKLAKE DRIVE
CITY-ST-ZIP ATLANTA GA 30345 ☐ Delete

TITLE D
NAME Mr. Todd Mudger ☐ Change ☒ Addition
STREET ADDRESS 6 Hawthill Drive
CITY-ST-ZIP Mauldin, SC 29462

TITLE D
NAME MCINTYRE, HEIDI
STREET ADDRESS 2580 S CONWAY ROAD SUITE 1012
CITY-ST-ZIP ORLANDO FL 32812 ☐ Delete

TITLE D
NAME Mr. Dan Kelly ☐ Change ☒ Addition
STREET ADDRESS 15720 John J. Delaney Drive
CITY-ST-ZIP Suite 300 Charlotte, NC 28277

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

4-18-02 941-776-2910

Date

Daytime Phone #

CR2E037 (9/01)