

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91325 032 ***150.00

DOCUMENT # **P13407** ✓

1. Entity Name

Chiquita Citrus Packers, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
c/o Tax Dept.; 250 E. Fifth St.

3. Mailing Address
c/o Tax Dept.; 250 E. Fifth St.

Suite, Apt. #, etc.
27th Floor

Suite, Apt. #, etc.
27th Floor

City & State
Cincinnati, OH

City & State
Cincinnati, OH

Zip
45202

Country
USA

Zip
45202

Country
USA

4. FEI Number
04-2476807

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Ct Corporaion

Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road

City
Plantation FL Zip Code
33324

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	D/V/St Robert W. Olson 250 East Fifth St. Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D/V William A. Tsacalis 250 East Fifth St. Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D/P James H. Wiley 250 East Fifth St., Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V/F1 Carla A. Byron 250 East Fifth St. Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V Joseph W. Bradley 250 East Fifth St. Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V John M. Tate 250 East Fifth St. Cincinnati, OH 45202	TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph W. Bradley

04/26/02

Date

(513) 784-8727

Daytime Phone #

CR2E034B (12/01)