

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 MAY -1 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000035253(2)

1. Corporation Name

Grigsby Family Juice Products, Inc.
(Formerly Florida Juice, Inc.)

Principal Place of Business

Mailing Address

000001482940
-05/10/95--01079--017
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 4101 SR 70 East		26 P.O. Box 985		05/17/93		05/17/93	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0410241		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		X \$8.75 Additional Fee Required	
23 Lake Placid Florida		28 Lake Placid Florida		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
24 33862		25		29 33862		30	
Zip		Country		Zip		Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				Grigsby, Ronald P.			
				4101 SR 70 East			
				Lake Placid FL			
				33852			
				85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Ronald P. Grigsby

(Signature of Registered Agent has effect only when recorded)

3-30-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE		13.1 TITLE	P V S D
11.2 NAME		13.2 NAME	Grigsby, Ronald P.
11.3 STREET ADDRESS		13.3 STREET ADDRESS	4101 SR 70 East
11.4 CITY, ST, ZIP		13.4 CITY, ST, ZIP	Lake Placid Florida 33852
11.5 TITLE		13.5 TITLE	
11.6 NAME		13.6 NAME	
11.7 STREET ADDRESS		13.7 STREET ADDRESS	
11.8 CITY, ST, ZIP		13.8 CITY, ST, ZIP	
11.9 TITLE		13.9 TITLE	
11.10 NAME		13.10 NAME	
11.11 STREET ADDRESS		13.11 STREET ADDRESS	
11.12 CITY, ST, ZIP		13.12 CITY, ST, ZIP	
11.13 TITLE		13.13 TITLE	
11.14 NAME		13.14 NAME	
11.15 STREET ADDRESS		13.15 STREET ADDRESS	
11.16 CITY, ST, ZIP		13.16 CITY, ST, ZIP	
11.17 TITLE		13.17 TITLE	
11.18 NAME		13.18 NAME	
11.19 STREET ADDRESS		13.19 STREET ADDRESS	
11.20 CITY, ST, ZIP		13.20 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ronald P. Grigsby
SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ronald P. Grigsby

3/31/95

813/465-4455