## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

## FILED DOCUMENT # P93000036946 May 11, 2000 8:00 am Secretary of State 1. Entity Name CITRUS RECOVERY CORPORATION 05-11-2000 90370 001 \*\*\*300.00 Mailing Address Principal Place of Business 1717 INDIAN RIVER BLVD. 1717 INDIAN RIVER BLVD. STE 100 STE 100 VERO BEACH FL 32960-0800 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0415993 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Riley, Randy J. SPEIGHT, HENRY O Street Address (P.O. Box Number is Not Acceptable) 1717 Indian River Blvd., 1717 INDIAN RVR BLVD **STE 100** Suite 100 VERO BEACH FL 32960 City Vero <u>B</u>each Zip Code 32960 rapse of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits <u>Randy J. Riley, President</u> SIGNATURE Signature, typed or printe FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE Director ☐ Change ☐ Delete TITLE BRACKETT, ROBERT L NAME Masteller, Earl H. NAME STREET ADDRESS 1717 INDIAN RIVER BLVD. STREET ADDRESS. 869 Robin Lane CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32960 <u>Sebastian, FL 32958</u> □ Change ▼ Addition ☐ Delete TITLE Director TITLE **GRAVES JR, HUBERT** NAME NAME Lambert, Roy H. 1717 INDIAN RIVER BLVD. STREET ADDRESS STREET ADDRESS 990 Sandfly Lane CITY-ST-ZIP VERO BEACH FL CITY-ST-ZIP Vero Beach, FL 32963 X Addition ☐ Delete TITLĖ TITLE President SCHLITT, LOUIS L Riley, Randy J. NAME NAME 1717 INDIAN RIVER BLVD. STREET ADDRESS STREET ADDRESS 1717 Indian River Blvd., Ste 100 CITY-ST-ZIP VERO BEACH FL CITY-ST-ZIP Vero Beach, FL 32960 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SMITH JR, WALTER E. NAME NAME 1717 INDIAN RIVER BLVD. STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITI F TITLE THOMPSON, JAMES R NAME NAME 1717 INDIAN RIVER BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FK CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE COX JR, JOSH C NAME NAME 1717 INDIAN RVR BLVD STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FK 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 Block 12 if

other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rilev, President

4/28/00