FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047420

BLOOMINGDALE GROWERS, INC.

Principal Place of Business

Mailing Address

3902 E BLOOMINGDALE BLVD VALRICO FL 33594

3902 E BLOOMINGDALE BLVD VALRICO FL 33594

FILED Jan 27, 1999 8:00am **Secretary of State**

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VACINOO I E O		VALINOO 1 E 00004			DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed 06/28/1993		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-3193537	H	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				· \$8.7	5 Additional
22	d .	27			5. Certificate of Status Desired	·	Required
City & Stat	te	City & State			6. Election Campaign Financing		
23		28			Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Countr	ν	This corporation owes the current y		50 10 1 663
24	25	- 	30	,	Personal Property Tax.	ear intangible ☐ Yes	□No
	9. Name and Address of Current		- J		10. Name and Address of New Regis		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(164 f 164 h)	81	Name	Harris and Addieso of Heat Magis		
EDE	NFIELD, MICHAEL S						
∂ 0206	MASON STREET		82	Street Add	dress (P.O. Box Number is Not Acceptable)		-
	NDON FL 33511		83		1900 - Carrier Carrier - A Marco - Mar	திர்கள் இந்த அதிரிக்கள்	and the real residence
	··		83	'		(6) 雄樹!	胚門類態!
		•	84	City	THE THE STATE OF THE PROPERTY OF THE STATE O	≟. 85 Z	ip Code
Appendig of the country	and the second of the second o			1		FL T	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statutes f Florida. Such change was autons of Section 607.0505. Florida	s, the above thorized by	re-named corporat	poration submits this statement for the purpoion's board of directors. I hereby accept the	ose of changing appointment as	its registered registered
•	and accept the congati	one or, occitori our coop, Fiori	ua Statute:	J.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	nt signature requir	ed when reinstating)	ATE	
12.	OFFICERS AND		13.	- grand raddin	ADDITIONS/CHANGES TO OFFICE		TORS IN 12
TITLE	D	DELETE	1,1 TITLE		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Chan	
NAME	DAVIDSON, CHARLES L	_ ·	1.2 NAME		FROM ERMINATION		
STREET ADDRESS	3902 E BLOOMINGDALE	4	1	TADDRESS	•		
	VALRICO FL 33594						
CITY-ST-ZIP TITLE		□ DELETE	1.4 CITY-S 2.1 TITLE	si-ZIP	75-72-1-1-1-100.	☐ Chanc	ie Addition
	DAMPOON ANNUE M					□ cuang	је Пураціол
NAME	DAVIDSON, ANNIE M		2.2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS	·		
CITY-ST-ZIP	VALRICO FL 33594	<u> 1 19. 225 </u>	2.4 CITY-	ST-ZIP			
TITLE SOL		DELETE	3.1 TITLE			☐ Chang	e Addition
NAME: OOC			3.2 NAME				
STREET ADDRESS		7	3.3 STREE	TADDRESS	the state of the state of the state of		付き きょけくけい ラフェ
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	经营业的	
TITLE		☐ DELETE	4.1 TITLE			Chang	e Addition
NAME 2007 1 DECEMBER			4. 2 NAME				_
STREET ADORESS	1913 - 1 m m	to the control of the second		T ADDRESS	•		
CITY-ST-ZIP		** /				:	÷
TITLE		☐ DELETE	4.4 CITY-S 5.1 TITLE	1-212		☐ Chang	e
	•	C DELETE	5.1 IIILE 5.2 NAME	.	्राप्तकात्र स्थापना स्थापना स्थापना	☐ Chang	- Munition
NAME '	•				Contact the		•
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CITY-ST-ZIP			5.4 CfTY-S	T-ZIP	5 th 15 35 87 cm		
TITLE		. DELETE	6.1 TITLE			' ☐ Chang	e Addition
NAME -	SANCE ENGINEERS OF ENGINEER		6.2 NAME				
STREET ADDRESS	(A)		6.3 STREET	TADDRESS	•		

CITY-ST-ZIP 14. 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 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 this report as required by Chapter 607, Florida Statutes; and that my pame appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.