

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000065848 (2)

1. Corporation Name

F & W HARVESTING, INC.

Principal Place of Business

Mailing Address

ALTMAN ROAD
WAUCHULA FL 33873
US

P.O. BOX 54
WAUCHULA FL 33873



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/21/1993	3a. Date of Last Report 07/19/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. # etc.	4. FEI Number 65-0431616	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

WILLIAMS, C. KAY
112 W PALMETTO ST
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81	Name	SAME
82	Street Address (P.O. Box Number is Not Acceptable)	711 Altman Rd.
83		
84	City	Wauchula
85	Zip Code	FL 33873

11. Pursuant to the provisions of Sections 607.0509 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

C. Kay Williams

Signature typist or provider of new registered agent and fee (if applicable)

(Print) Registered Agent signature required when re-registering

7/28/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	WILLIAMS, C. KAY	1.2 NAME	
STREET ADDRESS	ALTMAN ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	WAUCHULA FL	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	
NAME	WILLIAMS, GREGORY L.	2.2 NAME	
STREET ADDRESS	ALTMAN ROAD	2.3 STREET ADDRESS	
CITY - ST - ZIP	WAUCHULA FL	2.4 CITY - ST - ZIP	
TITLE	ST	3.1 TITLE	ST
NAME	FLORES, JOSE L.	3.2 NAME	Gregory L. Williams
STREET ADDRESS	81 HANCHEY RD.	3.3 STREET ADDRESS	711 Altman Rd.
CITY - ST - ZIP	WAUCHULA FL	3.4 CITY - ST - ZIP	Wauchula, FL 33873
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

C. Kay Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/28/96 944-7733448
Date Digitized

CR2E034 (3/96)