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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 20 1998 8:00am Secretary of State

1998 P94000035542 (7) DOCUMENT # CRITTENDEN - LANGLEY FRUIT COMPANY, INC. Principal Place of Business Mailing Address 15 S KISSIMMEE AVE P.O. BOX 561079 OCOEE FL 34761 ORLANDO FL 32856 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1994 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 59-324 1995 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. ×× 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SCHUUR, HARRY J 15 SOUTH KISSIMMEE AVENUE Street Address (P.O. Box Number is Not Acceptable) OCOEE FL 34761 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE CRITTENDEN, EARL M NAME 12 NAME 2E034 1023 PINAR DR STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 1.4 CITY-ST-ZIP Change ☐ DELETE Addition LANGLEY, A. E. NAME 1831 BETT MAR LANE STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE SCHUUR, HARRY J III NAME 3.2 NAME 3226 DEBBIE DRIVE 3.3 STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-ZIP CITY - ST - ZIP DELETE __ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DFI FTF Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 name appears in Block 12 or Block 13 if prayed, or on an attachment with an address.

SIGNATURE: Hang Chail BEDI: EQUITARIN J. Schoor, III 1-5-98 407-871-2455