Feb 09, 1999 8:00 am Secretary of State

02-09-1999 90008 024 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000037493** 1. Corporation Name

WALKER GROVES GIFT FRUIT, INC.

Principal Plac	te of Business	Mailing Address								
,		580 STATE RD 559				j				
580 STATE RD AUBURNDALE		AUBURNDALE FL 33823				!				
							DO NOT WRITE IN THE	S SPACE ·		1
						3.	Date Incorporated or Qualifed			
						!	05/13/1994			┨
2. Principal P	Place of Business	2a. Mailing Address				4.	FEI Number	h	plied For	- 9
21		26					59-3249125		t Applicable	- Ç
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired	φο./ο/ Fee Re	Additional	(,
City & Stat	••	City & State				ام	Figure Consider Financias		<u> </u>	1
— , ·	te	28				٥.	Election Campaign Financing Trust Fund Contribution	\$5.00 Added		١.
Zip	Country	Zip	Coun	trv	1	8	This corporation owes the current year Ir		•	1
24	25	·	30	•		۱.	Personal Property Tax.	Yes	□No	
44	9. Name and Address of Curren					10.	Name and Address of New Registered	Agent		1
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	lker, sally l		-	B2 Stre	ot Addros	- /C	O. Box Number is Not Acceptable)			1
○ □ 580	STATE RD 559		l'	52 306	ei Addies	ا) د	Box Number is Not Acceptable)	A - 5 - 1844/ 4744		
AUB	BURNDALE FL 33823			B3		-	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]			
	•		-	B4 City				* 85 Zip	Code	1
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<u> </u>	3					<u>, i</u>	F	<u> </u>		
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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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

City-St-ZIP