

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000041445

Entity Name: SUNBELT CITRUS, INC.

FILED
Jan 15, 2004
Secretary of State

Current Principal Place of Business:

6565 33RD ST
VERO BEACH, FL 32966 US

New Principal Place of Business:

Current Mailing Address:

6565 33RD ST
VERO BEACH, FL 32966 US

New Mailing Address:

FEI Number: 59-3247478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSEY, R.D. JR.
17285 SE 248 TERR
UMATILLA, FL 32784

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MASSEY, MARY JANE
Address: 6565 33RD ST
City-St-Zip: VERO BEACH, FL

Title: VTD () Delete
Name: MASSEY, KATHLEEN A
Address: 10809 S.W ALLAPATTAN RD
City-St-Zip: INDIAN TOWN, FL

Title: D () Delete
Name: MASSEY, RICHARD D SR
Address: 6565 33RD ST.
City-St-Zip: VERO BEACH, FL 32966

Title: D () Delete
Name: MASSEY, SCOTT W
Address: 10809 SW ALLAPATTAN DR.
City-St-Zip: INDIANTOWN, FL 34956

Title: D (X) Delete
Name: GEORGE, MARY K
Address: 6565 23RD ST.
City-St-Zip: VERO BEACH, FL 32966

Title: D () Delete
Name: MASSEY, R.D. JR
Address: 17285 SE 248TH TER.
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY JANE MASSEY

PRES

01/15/2004

Electronic Signature of Signing Officer or Director

Date