

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90131 021 ***150.00

DOCUMENT # P94000041445

1. Entity Name
SUNBELT CITRUS, INC.



Principal Place of Business
**6565 33RD ST
VERO BEACH FL 32966
US**

Mailing Address
**6565 33RD ST
VERO BEACH FL 32966
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3247478**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSD	<input type="checkbox"/> Delete
NAME	MASSEY, MARY JANE	
STREET ADDRESS	6565 33RD ST	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	MASSEY, KATHLEEN A	
STREET ADDRESS	10809 S.W ALLAPATTAN RD	
CITY-ST-ZIP	INDIAN TOWN FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MASSEY, RICHARD D SR	
STREET ADDRESS	6565 33RD ST.	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	MASSEY, SCOTT W	
STREET ADDRESS	10809 SW ALLAPATTAN DR.	
CITY-ST-ZIP	INDIANTOWN FL 34956	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE, MARY K	
STREET ADDRESS	6565 23RD ST.	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	MASSEY, R.D. JR	
STREET ADDRESS	17285 SE 248TH TER.	
CITY-ST-ZIP	UMATILLA FL 32784	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MARY JANE MASSEY

SIGNATURE: *Mary Jane Massey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-03
Date

772-978-0880
Daytime Phone #

CR2E034 (10/02)