

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060038

FILED  
May 01, 2005  
Secretary of State

Entity Name: SCENIC CITRUS HARVESTERS, INC.

**Current Principal Place of Business:**

30 E. 8TH ST.  
FROSTPROOF, FL 33843

**New Principal Place of Business:**

**Current Mailing Address:**

2010 N. LAKE REEDY  
FROSTPROOF, FL 33843 US

**New Mailing Address:**

FEI Number: 59-3267516      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HIGGINBOTTOM, DAVID B  
101 E. WALL ST.  
FROSTPROOF, FL 33843 US

**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: P ( ) Delete  
Name: RESPRESS, ERNEST L  
Address: 30 E. 8TH ST.  
City-St-Zip: FROSTPROOF, FL

Title: VP ( ) Delete  
Name: RESPRESS, ERNEST P  
Address: 30 E. 8TH ST.  
City-St-Zip: FROSTPROOF, FL

Title: ST ( ) Delete  
Name: RESPRESS, MARY L  
Address: 30 E. 8TH ST.  
City-St-Zip: FROSTPROOF, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RESPRESS, ERNEST L  
Address: 2010 N LAKE REEDY BLVD  
City-St-Zip: FROSTPROOF, FL

Title: VP (X) Change ( ) Addition  
Name: RESPRESS, ERNEST P  
Address: 2010 N LAKE REEDY BLVD  
City-St-Zip: FROSTPROOF, FL

Title: ST (X) Change ( ) Addition  
Name: RESPRESS, MARY L  
Address: 2010 N LAKE REEDY BLVD  
City-St-Zip: FROSTPROOF, FL

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 L. RESPRESS

ST

05/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date