

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060038

FILED  
Apr 25, 2006  
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:

2010 N LAKE REEDY BLVD  
FROSTPROOF, FL 33843

## 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:

RESPRESS, LYNN  
150 DEVANE STREET  
FROSTPROOF, FL 33843 US

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: LYNN RESPRESS

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 LYNN RESPRESS

ST

04/25/2006

Electronic Signature of Signing Officer or Director

Date