

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 15, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P94000088255

1. Entity Name  
SUNCOAST CITRUS, INC.



Principal Place of Business  
1095 A US 92 W  
AUBURNDALE, FL 33823

Mailing Address  
P O BOX 707  
SAN ANTONIO, FL 33576-0707 US

**DO NOT WRITE IN THIS SPACE**



03092006 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3287528

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

FEEK, WILLIAM  
12843 HAPPY HILL RD  
DADE CITY, FL 33525

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	FEEK, WILLIAM
STREET ADDRESS	1095 A US 92 W
CITY-ST-ZIP	AUBURNDALE, FL 33823
TITLE	SD
NAME	WEAVER, ALISA F
STREET ADDRESS	1095 A US 92 W
CITY-ST-ZIP	AUBURNDALE, FL 33823
TITLE	PTD
NAME	FEEK, WILLIAM
STREET ADDRESS	1095 A US 92 W
CITY-ST-ZIP	AUBURNDALE, FL 33823
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000468745  
03/25/06-80001-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: William FEEK  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 13, 2006 863-667-3997  
Date Daytime Phone #