FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000094246 (3)

GENE'S CITRUS RANCH, INC.

FILED Mar 18 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address	Mailing Address						
11300 O'NEIL RD.		P.O. BOX 996							
PALMETTO FL 34220-0896		PALMETTO FL 34220-0996]	DO NOT WRITE IN THIS SPACE			
US		US		3.	3. Date Incorporated or Qualified				
						12/29/1994			
2. Principal Pl	ace of Business	2a. Mailing Address			4.	4. FEI Number Applied For			
21		26				65-0547216 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	. Certificate of Status Desired		Additional legulred	
City & State		City & State				Election Comparing Pinnster			
23		26		6.	Election Campaign Financing Trust Fund Contribution		May Be to Fees		
Zip	Country	Zip	Coun	try	8.	. This corporation owes or has paid the o			
24	25	29	ю		-	Personal Property Tax due June 30.		□ No	
	9. Name and Address of Curren	t Registered Agent				Name and Address of New Registers	d Agent		
EUGENE A. MIXON			18	91	Name				
11300 O'NEIL ROAD		62 Street Ac		Street Address (F	P.O. Box Number is Not Acceptable)				
PALMETTO FL 34220			-	B3					
				>3					
			1	34	City	F	L 85 Zip	Code	
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the abo	ove-i	named corporation	on submits this statement for the purpose	of changing	its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature, typed or printed name of registered age OFFICERS AND		Registered /	Agent	nt signature required when	n reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIPECTO	RS IN 12	
TITLE	P OFFICERS AND	DELETE	1.1 TITL	.E		ADDITIONS/OFFICERS A	Change	Addition	
NAME	MIXON, EUGENE A	 -	1.2 NAM		i		_ •		
STREET ADDRESS	2906 28TH AVENUE E		1.3 STR	EET AL	ADDRESS				
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-		- ZIP			· · · · <u>· · · · · · · · · · · · · · · </u>	
TITLE	V	DELETE	2.1 TITLE				Change	Addition	
NAME	MIXON, R. E		2.2 NAM	Æ]	
STREET ADDRESS	3134 47TH AVENUE E		2.3 STR	EET AI	ADDRESS				
CITY-ST-ZIP	BRADENTON FL	Dr. cvc	2.4 CITY		T- ZIP			1 1 1 1 1 1 1 1	
TITLE	8	DELETE 3.1		_			Change	Addition	
NAME	MIXON, SCOTT S		3.2 NAM					,	
STREET ADDRESS	2833 48TH WAY EAST				ADDRESS				
CITY-ST-ZIP TITLE	BRADENTON FL	DELETE	3.4. CITY 4.1 TITU		1-214		Change	Addition	
NAME	MIXON, CAROLE P		4.2 NAN						
STREET ADDRESS	2908 26TH AVENUE E				ADORESS			ĺ	
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-1						
TITLE	<u> </u>	DELETE	5.1 TITL				Change	Addition	
NAME			5.2 NAM	1E	ľ				
STREET ADDRESS			5.3 STR	EET AL	address			1	
CITY-ST-ZIP			5.4 CITY	(-ST-	- ZIP				
TITLE		DELETE	6.1 TITU	ŧ			Change	Addition	
NAME			6.2 NAM	ŧE.					
STREET ADDRESS			6.3 STR	EET AL	ADDRESS			1	
CITY OF THE			6400		905				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

941-723-0504