## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 16, 2007 8:00 am Secretary of State **DOCUMENT # P95000039816** 03-16-2007 90042 030 \*\*\*150.00 1. Entity Name INDIAN RIVER CITRUS STAND, INC. **200010#** Principal Place of Business Mailing Address 1701 HWY AIA STE 208 PO BOX 4080 VERO BEACH, FL 32964 VERO BEACH, FL 32963 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1701 HWY A1A Suite, Apt. #, etc. SUITE 208 Suite, Apt. #, etc. 01102007 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number VERO BEACH. 65-0593111 Not Applicable <sup>Zip</sup>32963 Country USA Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRADSHAW, CHARLES J Street Address (P.O. Box Number is Not Acceptable) 1701 HWY A1A **STE 208** VERO BEACH, FL 32963 City Zip Code FL 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD ☐ Change ☐ Addition TITLE ☐ Delete TITLE BRADSHAW, CHARLES J NAME NAME 1701 HWY A1A STE 208 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32963 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition SMITH, ELIZABETH H NAME NAME STREET ADDRESS 1701 HWY A1A STE 208 STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32963 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition BASS, CINDY L NAME NAME STREET ADDRESS 1701 HWY A1A SUITE 208 STREET ADDRESS VERO BEACH, FL 32963 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter (19, 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.

2/13/07

FILED