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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000063603 (1)

A BYTE OF CITRUS, INCORPORATED

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									1110 81111 88	(43)()) (43)	
210 WEST TOMPKINS STREET 210 WEST TOMPKINS STREE					TREET						
INVERNESS F	L 344 50		INVERNESS FL 34450					DO NOT WRITE IN THIS SP	∆CE		
								3. Date Incorporated or Qualified	TOL		
								08/16/1995			
2. Principal P	lace of Business		2a. Mailing	Address				4. FEI Number .	TA	pplied For	
21 1840		west		10 Hw	VVV	(We St	59-3337412		ot Applicable	
Sulte, Apt.	#, etc.		Suite, Ap	ot. #, etc.	-1					Additional	
22			27					5. Certificate of Status Desired	Fee R	equired	
City & State	е	<u> </u>	City & S		_	<u> </u>		6. Election Campaign Financing	\$5.00	May Be	
	erness,	FL	28 1/1	ernes	55 , ,	F۷		Trust Fund Contribution		to Fees	
ZID	Count	"USA	Zip 34	U	Cou	entry		8. This corporation owes or has paid the curre	_	·	
24 344	3 25			123	30	<u> </u>	15 A	Personal Property Tax due June 30.		No	
	9, Name and Addr	ess of Current R	Registered Age	ent		041	Nesse	10. Name and Address of New Registered Ag	ent		
NOGENS, JEFF							Name				
210 WEST TOMPKINS STREET B2 Str							Street Add	t Address (P.O. Box Number is Not Acceptable)			
INVERNESS FL 34450						B3					
						63				-	
						84	City		85 Zip	Code	
								FL			
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											
12,	Signature, typed or printed nam	io of registered agent at DEFICERS AND D		(NO	TE. Registere	d Ager	ni signature req	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D	IDECTO	DC IN 12	
TITLE	<u> </u>	I TIGENS AND E		DELETE	1179	TI F	T		Change	Addition	
NAME	ROGERS, JEFF		_		1.2 N/						
STREET ADDRESS	210 WEST TOMP	KINS STREET					ADDRESS	ROYCIS, JETT			
CITY-ST-ZIP	INVERNESS FL 34					TY-\$1		Rogers, Jeff 1840 HWY 44W INVERNESS, FL 344	573		
TITLE	111121111200120	1100		DELETE	2170		1-4"		Change	Addition	
NAME				_	2.2 N/			, –	_	_	
STREET ADDRESS							ADDRESS	• u•			
CITY-ST-ZIP					2.40						
TITLE				DELETE	3.1 70				Change	Addition	
NAME					3.2 N/			_	-		
STREET ADDRESS					4		ADORESS				
CITY+ST-ZIP					3.4. C						
TITLE				DELETE	4.1 Ti				Change	Addition	
NAME					4. 2 N	AME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						TY-\$1					
TITLE				DELETE	5.1 TII			T C	Change	Addition	
NAME					5.2 N/	ME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					5.4 CI						
TITLE				DELETE	6.1 10			<u> </u>	Change	Addition	
NAME					6.2 NA				-		
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					6.4 CI						
dd Lberchus	and the short short independent	on a montined with	this filles does	not evalify:				in Contine 110 07/2\(\text{ii}\) Elevide Statutes I further and it	. 464 46		

Indicated on this annual report or supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the informatic 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 trusted 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.

1/5/98