

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90133 024 ***158.75

DOCUMENT # P96000024923

1. Entity Name

SILVER SPRINGS CITRUS, INC.



Principal Place of Business

P. O. BOX 155
HOWEY-IN-THE-HILLS FL 34737-0155

Mailing Address

P. O. BOX 155
HOWEY-IN-THE-HILLS FL 34737-0155



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number 59-1149667

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name --

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DCEO	<input type="checkbox"/> Delete
NAME	TAKAI, YOSHIMI	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737	
TITLE	T	<input type="checkbox"/> Delete
NAME	HALL, MICHAEL	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY IN THE HILLS FL 34737-0155	
TITLE	D	<input type="checkbox"/> Delete
NAME	WIENER, WILLIAM J	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737	
TITLE	PD	<input type="checkbox"/> Delete
NAME	REES, JOHN N	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737	
TITLE	VP	<input type="checkbox"/> Delete
NAME	YOUNGBLOOD, E. GARY	
STREET ADDRESS	25411 MARK AVENUE	
CITY - ST - ZIP	HOWEY IN THE HILLS FL 34737	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HASEGAWA, TAKASHI	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY IN THE HILLS, FL 34737	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNGBLOOD, E. GARY	
STREET ADDRESS	25411 MARE AVENUE	
CITY - ST - ZIP	HOWEY IN THE HILLS, FL 34737	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/28/05

352-324-2101 EXT 269

Date

Daytime Phone #