

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000042613****1. Entity Name**
M & H CITRUS, INC.**FILED**
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90052 006 ***150.00

Principal Place of Business**407 FLATWOOD DRIVE**
WINTER SPRINGS FL 32708
US**Mailing Address****407 FLATWOOD DRIVE**
WINTER SPRINGS FL 32708
US**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3389680**

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****MARTIN, GEORGE W**
407 FLATWOOD DRIVE
WINTER SPRINGS FL 32708

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.**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	D	<input type="checkbox"/> Delete	HENDRIX, ANNE M		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	7150 FRANCIS IRENE DR		CHARLOTTE NC 28215				
	D	<input type="checkbox"/> Delete	HENDRIX, C W JR		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	2655 CURRYVILLE RD		CHULOTA FL 32766				
	D	<input type="checkbox"/> Delete	MARTIN, PAULA J		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	407 FLATWOOD DRIVE		WINTER SPRINGS FL				
	D	<input type="checkbox"/> Delete	MARTIN, GEORGE W		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	407 FLATWOOD DRIVE		WINTER SPRINGS FL				
	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition		

CR2E034 (10/00)

13. 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 11 or Block 12 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

George W. Martin

Date

Daytime Phone #

2/1/01

407-509-3185