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FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000043291 (9)

1. Corporation Name
TROPICAL CITRUS SECTIONS, INC.



Principal Place of Business

2135 N OLD DIXIE HWY
FT PIERCE FL 34946
US

Mailing Address

2135 N OLD DIXIE HWY
FT PIERCE FL 34946
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23. City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27. City & State

28 Zip 29 Country

4. FEI Number

65-0674427

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

KIRKLAND, RICHARD L
6990 45TH ST
VERO BEACH FL 32967

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPVP
NAME KIRKLAND, RICHARD L
STREET ADDRESS 6990 45TH ST
CITY-ST-ZIP VERO BEACH FL ☒ DELETE

TITLE P
NAME LANGFITT JR, DAVID R
STREET ADDRESS 6220 69TH ST
CITY-ST-ZIP VERO BCH FL ☐ DELETE

TITLE Y
NAME LANGFITT, GAIL C
STREET ADDRESS 6220 69TH ST
CITY-ST-ZIP VERO BCH FL ☐ DELETE

TITLE S
NAME KIRKLAND, STARLET C
STREET ADDRESS 6990 45TH ST
CITY-ST-ZIP VERO BCH FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE President ☐ Change ☒ Addition
1.2 NAME Langfitt Jr, DAVID R
1.3 STREET ADDRESS 2425 53rd Ave
1.4 CITY-ST-ZIP Vero Beach FL 32966

2.1 TITLE Secretary ☐ Change ☒ Addition
2.2 NAME Gail Langfitt
2.3 STREET ADDRESS 2425 53rd Ave
2.4 CITY-ST-ZIP Vero Beach FL 32966

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2425 53rd Ave
3.4 CITY-ST-ZIP Vero Beach FL 32966

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Gail Langfitt GAIL LANGFITT sec/TREAS 1/23/98 561-567-5464

CR2E034 (10/97)