

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**  
05-17-2000 90863 009 \*\*\*150.00

1. Entity Name  
**MAC CITRUS, INC.**

2255 HWY 17-92 N  
HAINES CITY FL 33844

P O BOX 3442  
HAINES CITY FL 33845-3442

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Zip Code

DATE \_\_\_\_\_

**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00** May Be Added to Fees

|                |   |
|----------------|---|
| CITY OF LA     |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY, ST, ZIP  |   |

Daytime Phone #

CR2E034 (9/99)