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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000005224 (5)

GOLD BRITE CITRUS, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			r endetendt ein vorte entet norte datet norte datet anter deter ferte frank eidet athe finnt
POST OFFICE BOX 572 VERO BEACH FL 32961-0572		POST OFFICE BOX 572			
		VERO BEACH FL 32961-0572			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					01/13/1997
2. Principal Place of Business 2a. Mailing Address					4, FEI Number Applied For
21		26			65-07/87/4 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22		27	27		Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23	-	28			Trust Fund Contribution
Zip Country		Zip	⊢ , '		8. This corporation owes or has paid the current year Intangible
25 29			30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Hegistered Agent	8	1 Name	10. Name and Address of New Registered Agent
LEE, DEMPSEY C			*	Name	,
	5 2ND STREET		8	2 Street Address (P.O. Box Number is Not Acceptable)	
VER	IO BEACH FL 32966		8	2	
			*	3	
			8	4 City	B5 Zip Code
					FL V
office or re	gistered agent, or both, in the Stanian familiar with, and accept the obtaining the control of t	ate of Florida. Such change was a	authorized	by the cor	d corporation submits this statement for the purpose of changing its registered rporation's board of directors, I hereby accept the appointment as registered
SIGNATURE _	Signature, typed or printed name of registered i	Alor	f. Degistored	Seed sincebur	re required when reinstating) DATE
12,		AND DIRECTORS	13.	gent signaturi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 1111		Change Addition
NAME	LEE, DEMPSEY C		1.2 NAM	E	
STREET ADDRESS POST OFFICE BOX 572				ET ADDRESS	
CITY-ST-ZIP	LEDO BELOU EL COCCA CESO		1.4 CITY-SI-ZIP		}
TITLE	70	DELETE	2.1 TITL		Change Addition
NAME			2.2 NAM	E	
STREET ADDRESS				et address	
CITY-ST-ZIP			4	- ST- ZIP	
IIILE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		_ , _
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP				'- ST - ZHP)
TITLE	DELETE		4.1 TiTL		Change Addition
NAME	i i		4. 2 NAME		_ ,
STREET ADDRESS			1	ET ADDRESS	
CITY-ST-ZIP			1	- ST- ZIP	
		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		_	5.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	-	
TITLE			6.1 TITLE		Change Addition
i			6.2 NAM		,
I			1	=	
			L		
	ertify that the information supplied	with this filing does not qualify for			Ited in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated o	on t his annual report or supplemen	ntal annual report is true and acceptiver or trustee empowered to	6.3 STRE 6.4 CITY or the exen curate and	ET ADDRESS -ST-ZIP option state that my sig	