

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000099465**

1. Entity Name

FLORIDA CITRUS PRODUCTION INPUTS, INC.



Principal Place of Business

5916 STATE ROAD 540  
WAVERLY, FL 33877

Mailing Address

P O BOX 570  
WAVERLY, FL 33877 US



04132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3481594

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

HOUK, WALLY  
5916 STATE ROAD 540  
WAVERLY, FL 33877

**DO NOT WRITE  
IN THIS SPACE**

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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GASPER, KOVACH JR
STREET ADDRESS	941 SUCCESS AVE
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	VD
NAME	HUNT, FRANK M III
STREET ADDRESS	HUNT BROS. RD
CITY-ST-ZIP	LAKE WALES, FL 33859
TITLE	SD
NAME	SANDERS, CHARLES M
STREET ADDRESS	1485 50TH CT
CITY-ST-ZIP	VERO BEACH, FL 32966
TITLE	TD
NAME	HOUK, WALLY
STREET ADDRESS	4738 EASTON STREET
CITY-ST-ZIP	LAKE WALES, FL 33859
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000312542  
04/18/05-80089-018 158.75

**DO NOT WRITE  
IN THIS SPACE**

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: Wally Houk WALLY HOUK, TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-05

Date

Daytime Phone #