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2004 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT					Apr 01, 2004 08:00 AM			
DOCUMENT # P98000027444					Secret	ary of S	tate	
	SUN CITRUS MANAGEME	NT, INC.						
Principal Place	e of Business	Mailing Address						
206 N 6TH A	NE.	P.O. BOX 2325						
WAUCHULA, 1	FL 33873	WAUCHULA, FL 33873						
				1 100150051	IN INTERN LUSSE NAISE NININ MARI		F(#1) #(#1##)) 1##3	
	^E	03262004	No Chg-P	CR2E034 (10	1/03)			
U	O NOT WRITE	UE	4. FEI Numb			Applied For		
				65-083		- \$8.7!	Not Applicable 5 Additional	
			<u>, , , , , , , , , , , , , , , , , , , </u>	5. Certificate	e of Status Desired		equired	
	6. Name and Address of Current R	egistered Agent	-			,		
SEE, JAMI	ES V JR.		DΩ	NOT W	DITE			
206 NORTH 6TH AVENUE WAUCHULA, FL 33873			DO NOT WRITE					
WACCHOL	_M, FL 33073	IN THIS SPACE						
8. The above	named entity submits this statement for	he purpose of changing its register	i red office or register	red agent, or bo	oth, in the State of Flo	rida. I am familiar	with, and accept	
the obligati	ions of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and title (I applicable (NOTE Registered Agent signature required when reinstating)						DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				.00 May Be led to Fees	U00000 04/01/04-)101062 80033-003	150.00	
10.	OFFICERS AND D	RECTORS		· · · · · · · · · · · · · · · · · · ·	·	· · · · · · · · · · · · · · · · · · ·		
TITLE	PSD							
NAME STREET ADDRESS	SEE, JAMES V JR 206 NORTH 6TH AVENUE							
CITY-ST-ZIP	WAUCHULA, FL 33873			•				
TITLE								
NAME								
STREET ADDRESS								
CITY-ST-ZIP			-		-			
TITLE NAME			·					
STREET ADDRESS				D0	NOT W	CITE		
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,			טט	NOT W	HIIE		
TITLE				IN '	THIS SF	PACE		
NAME				•••				
STREET ADDRESS CITY-ST-ZIP			I					
TITLE	-		1					
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STREET ADDRESS								
CITY+ST-ZIP		· - · · - · - · - · - · - · - · · - · · - · · - · · - · · · - ·	4				**	
TITLE								

12. Thereby 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 the rike empowered.

FLORIDA SULVISION MANAGEMENT, INC.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

James V. See, Jr., President

3/26/2004 (863)773-0C