

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 15, 2003 8:00 am**  
**Secretary of State**

07-15-2003 90021 029 \*\*\*150.00

**DOCUMENT # P98000034346**

1. Entity Name

**OWENS GROVE CORPORATION OF INDIANTOWN**



Principal Place of Business  
**16400 S.W. FARMS ROAD**  
**INDIANTOWN FL 34956**

Mailing Address  
**POST OFFICE BOX 306**  
**INDIANTOWN FL 34956**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0850742**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POWERS, MARSHA B**  
**16400 S.W. FARMS ROAD**  
**INDIANTOWN FL 34956**

Name

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

City

**FL**

Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
NAME **POWERS, KEVIN P**  
STREET ADDRESS **16400 SW FARMS RD**  
CITY-ST-ZIP **INDIANTOWN FL 34956**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Delete  
NAME **POWERS, MARSHA B**  
STREET ADDRESS **16400 SW FARMS RD**  
CITY-ST-ZIP **INDIANTOWN FL 34956**

TITLE **ST** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **ST** ☐ Delete  
NAME **POWERS, COLETTE**  
STREET ADDRESS **15300 S.W. MYRTLE DRIVE**  
CITY-ST-ZIP **INDIANTOWN FL 34956**

TITLE **VP** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Marsha B. Powers*

*4/25/03 772-597-2446*

Attachment  
Wholesalers & Retailers of Famous Indian River Fruit 90143023  
50 Years Serving the Indian River  
P98000034346



P. O. BOX 306  
INDIANTOWN, FLORIDA 34956  
561-597-2446 • Fax 561-597-5625

July 10, 2003

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

On Wednesday, July 9, 2003, I spoke to Tyrone Scott regarding the status of our Uniform Business Report (UBR). He relayed to me that your department has not received the report.

I originally mailed the UBR on April 25, 2003. I am enclosing a copy of the original report along with a check in the amount of \$150.00. I respectfully request that the late fee be waived due to circumstances out of my control.

I appreciate your consideration. If you have any questions or need additional information, please do not hesitate to call me at (772) 597-2446.

Sincerely,

  
Marsha B. Powers