

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90270 032 ***150.00

DOCUMENT # P98000058537

1. Entity Name
EGAN CITRUS CO.



Principal Place of Business
**1900 OLD DIXIE HIGHWAY
FORT PIERCE, FL 34946**

Mailing Address
**1900 OLD DIXIE HIGHWAY
FORT PIERCE, FL 34946**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04152004

Chg-P

CR2E034 (10/03)

4. FEI Number
22-1730979

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARNELL, RICHARD M JR
1900 OLD DIXIE HIGHWAY
FORT PIERCE, FL 34946**

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, 2004 Fee will be \$550.00**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPS
NELSON, GREGORY P.
1900 OLD DIXIE HIGHWAY
FORT PIERCE, FL 34946** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Nelson, Gregory P.
1900 Old Dixie Highway
Fort Pierce, FL 34946** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
REED, GLEN W
1900 OLD DIXIE HIGHWAY
FORT PIERCE, FL 34946** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVPS
Gilet, Jean Jacques
1900 Old Dixie Highway
Fort Pierce, FL 34946** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVPT
Egan, Robert W.
1900 Old Dixie Highway
Fort Pierce, FL 34946** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVPAsst.S
Carnell, Richard M.Jr.
1900 Old Dixie Highway
Fort Pierce, FL 34946** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

Richard M. Carnell, Jr.

Richard M. Carnell, Jr. 4/15/04 772-465-7555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Vice President**

Date

Daytime Phone #