### 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

#### 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

## **FILED** Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90257 040 \*\*\*150.00



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04082005 No 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

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

### DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	ourpose of changing its re	gistered office or i	registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Re	egistered Agent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		t,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP NELSON, GREGORY P 1900 OLD DIXIE HIGHWAY FORT PIERCE, FL 34946				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS GILET, JEAN J 1900 OLD DIXIE HIGHWAY FORT PIERCE, FL 34946				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT EGAN, ROBERT W 1900 OLD DIXIE HIGHWAY FORT PIERCE, FL 34946			DO N	OT WRITE
TITLE	DVAS			IN TL	IIC CDACE

# 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 outside empowered.

SI.	C)	JΔ	TI	12	E.

NAME

STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARNELL, RICHARD M JR

1900 OLD DIXIE HIGHWAY

FORT PIERCE, FL 34946

Richard M. Carnell, Jr.

Vice President

772-489-7275

Daytime Phone #