

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 09, 1999 8:00 am  
Secretary of State

03-09-1999 90089 020 \*\*\*150.00

DOCUMENT # P99000000109

1. Corporation Name

FIRST CHOICE BROKERS INC.

FIRST CHOICE FOOD BROKERS, INC

Principal Place of Business

Mailing Address

13514 GLEN HARWELL ROAD  
DOVER FL 33527

13514 GLEN HARWELL ROAD  
DOVER FL 33527



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1998

4. FEI Number

59-3551032

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 650 CARTER RD

26 1002 CROCKER LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 WINTER GARDEN, FL

28 PLANT CITY, FL

Zip

Country

Zip

Country

24 34787

25

USA

29 33565

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAYBURN, R D  
13514 GLEN HARWELL ROAD  
DOVER FL 33527

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *R. Donald Rayburn*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-1-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D, President  
NAME RAYBURN, R D  
STREET ADDRESS 1002 CROCKER LANE  
CITY-ST-ZIP PLANT CITY FL 33567

TITLE V.P. D  
NAME HARLEY W. EVERETT  
STREET ADDRESS 1027 BAL HARBOUR DR  
CITY-ST-ZIP APOLLO BEACH, FL 33572

TITLE D.V.P.  
NAME JIM JONES  
STREET ADDRESS 3201 STEVENSON ST  
CITY-ST-ZIP PLANT CITY, FL 33567

TITLE SECRETARY, Director  
NAME EW ELLIS  
STREET ADDRESS 6202 TAVAGER PL  
CITY-ST-ZIP TEMPLE TERRACE, FL 33617

TITLE TREASURER  
NAME KEN KELLY  
STREET ADDRESS 2905 MID SUMMER DR  
CITY-ST-ZIP WINDERMERE, FL 34786

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *R. Donald Rayburn*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/99

Date

941-425-0239

Daytime Phone #

CR2E034 (11/98)