


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S09308</b> 1. Entity Name FLORIDA SELECT CITRUS, INC.	
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Principal Place of Business  
305 W BROAD ST.  
GROVELAND, FL 34736 US

Mailing Address  
305 W BROAD ST.  
GROVELAND, FL 34736 US



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3033300	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

BENSCHER, JULIAN M  
5165 ISLEWORTH COUNTRY CLUB DRIVE  
WINDERMERE, FL 34786

**DO NOT WRITE  
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT BENSCHER, JULIAN M 305 W BROAD STREET GROVELAND, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ROAT, GEORGE 305 W BROAD STREET GROVELAND, FL 34736
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1000000352223  
05/03/05-80018-017 150.00

**DO NOT WRITE  
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 other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULIAN M. BENSCHER 04/27/05 352-429-2101  
Date Daytime Phone #