

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90166 044 ***158.75

DOCUMENT # S11990

1. Entity Name
CITRUS LIQUORS, INC.



Principal Place of Business
**712 S HWY 41
INVERNESS, FL 33450 US**

Mailing Address
**1301 4TH ST N
SAINT PETERSBURG, FL 33701 US**

94032357



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-3093056

Applied For

Not Applicable

Zip **33450**

Country

Zip

Country

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

**ENGEL, HARLOW E
1301 4TH ST N
SAINT PETERSBURG, FL 33701**

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 reinstalling)

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 **PD** ☐ Delete
NAME **ENGEL, HARLOW**
STREET ADDRESS **1301 4TH ST N**
CITY-ST-ZIP **SAINT PETERSBURG, FL 33701**

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

TITLE **V** ☐ Delete
NAME **DOOLITTLE, CHARLES E**
STREET ADDRESS **9424 E SOUTHGATE DR.**
CITY-ST-ZIP **INVERNESS, FL 34450**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/04 727-821-7770

54052357

April 30, 2004

TO: FLORIDA-DIV. OF CORPORATIONS

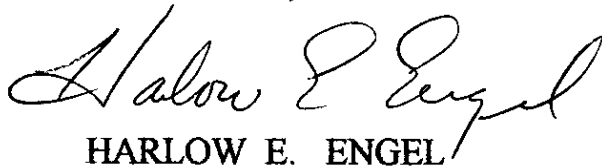
ATTN: BRENDA TADLOCK

THIS MORNING I RECEIVED THE FORMS TO FILE FOR THE
ANNUAL REPORTS FOR CITRUS LIQUORS INC. AND FLORIDA
TERMITE & PEST CONTROL INC..

THANKS FOR YOUR HELP.

PER YOUR INSTRUCTIONS, I WILL GET THESE POSTMARKED
TODAY SO I WILL NOT BE A "LATE FILER".

SINCERELY,

A handwritten signature in cursive script, reading "Harlow E. Engel". The signature is written in dark ink and is positioned above the printed name.

HARLOW E. ENGEL