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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # U00045 (8)

1. Corporation Name

FLORIDA FRESH CITRUS SALES, INC.

Principal Place of Business	Mailing Address
7406 N US HWY 1 VERO BCH FL 32967 US	P.O. BOX 335 WABASSO FL 32970 US

3. Date Incorporated or Qualified: 12/13/1991
3a. Date of Last Report: 02/12/1996

2. Principal Place of Business — 21: 7406 N. US Hwy#1
Suite, Apt. #, etc. — 22:
City & State — 23: Vero Beach, Florida
Zip — 24: 32967 Country — 25: U.S.A.

2a. Mailing Address — 26: P.O. BOX 335
Suite, Apt. #, etc. — 27:
City & State — 28: Wabasso, Florida
Zip — 29: 32970 Country — 30: U.S.A.

4. FEI Number: 65-0311953 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SIEBERT, WILLARD W. JR.
1041 RIVER TRAIL
INDIAN RIVER SHORES FL 32963

10. Name and Address of New Registered Agent

81 Name: Michael. D. Perry
82 Street Address (P.O. Box Number is Not Acceptable): 5065 Harmony Circle
83:
84 City: Vero Beach FL 85 Zip Code: 32967

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Michael D.Perry, President — 4/21/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DVT Chg.	☐ DELETE	1.1 TITLE	D/S	xbd Change ☐ Addition
NAME	GRAVES, J. RICHARD JR		1.2 NAME	Graves, J. Richard Jr.	
STREET ADDRESS	8465 OLD DIXIE HWY		1.3 STREET ADDRESS	8465 Old Dixie Hwy	
CITY-ST-ZIP	WABASSO FL		1.4 CITY-ST-ZIP	Wabasso, FL 32970	
TITLE	DVT	XXX DELETE	2.1 TITLE	President/CEO	☐ Change xbdx Addition
NAME	ROE, QUENTIN J.		2.2 NAME	Perry, Michael D.	
STREET ADDRESS	500 AVE R SW BOX 900		2.3 STREET ADDRESS	5065 Harmony Circle	
CITY-ST-ZIP	WINTER HAVEN FL		2.4 CITY-ST-ZIP	Vero Beach, FL. 32967	
TITLE	DP Chg.	☐ DELETE	3.1 TITLE	D/Chairman of Board	xbd Change ☐ Addition
NAME	ESTES, W. CODY SR		3.2 NAME	Estes, W. Cody Sr.	
STREET ADDRESS	4425 N US HIGHWAY 1		3.3 STREET ADDRESS	4425 N. US Highway 1	
CITY-ST-ZIP	VERO BEACH FL		3.4 CITY-ST-ZIP	Vero Beach,Fl. 32967	
TITLE	DVAS Chg.	☐ DELETE	4.1 TITLE	VP	xx Change ☐ Addition
NAME	RANSON, CHARLES T.		4.2 NAME	Ranson, Charles T.	
STREET ADDRESS	8465 OLD DIXIE HWY		4.3 STREET ADDRESS	8465 Old Dixie Hwy	
CITY-ST-ZIP	WABASSO FL		4.4 CITY-ST-ZIP	Wabasso, FL. 32970	
TITLE	V	XXX DELETE	5.1 TITLE	VP	☐ Change xx Addition
NAME	SIEBERT, WILLARD W. JR.		5.2 NAME	Wilton Russell Banack	
STREET ADDRESS	1041 RIVER TRAIL		5.3 STREET ADDRESS	4425 N. HS Highway 1	
CITY-ST-ZIP	INDIAN RIVER SHORES FL 32963		5.4 CITY-ST-ZIP	Vero Beach, Fl. 32867	
TITLE	DVAT	XXX DELETE	6.1 TITLE	D	☐ Change xx Addition
NAME	ROE, MORGAN H.		6.2 NAME	Jeff Bass	
STREET ADDRESS	500 AVE R SW BOX 900		6.3 STREET ADDRESS	8465 Old Dixie Hwy	
CITY-ST-ZIP	WINTER HAVEN FL		6.4 CITY-ST-ZIP	Wabasso, FL. 32970	

CR2E037 (9/96)

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE REQUIRED Michael D. Perry, Pres/CEO — 4/21/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0078032