## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 790559** 

Entity Name: FLORIDA CITRUS MUTUAL, INC.

**Current Principal Place of Business:** 

411 E ORANGE STREET LAKELAND, FL 33801-5054

**Current Mailing Address:** 

411 E ORANGE STREET LAKELAND. FL 33801-5054 US

FEI Number: 59-0580477 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

METHENY, KEVIN E 411 E ORANGE STREET LAKELAND, FL 33801-5054 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Jan 28, 2016

Secretary of State

CC5385818850

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR STORY, KYLE Name Name DEVANE, KENNY P O BOX 1221 912 NE 9TH STREET Address Address City-State-Zip: FT MEADE FL 33841 LAKE WALES FL 33859 City-State-Zip:

Title SECRETARY Title TREASURER

NameSORRELLS, STEVENameBROADWAY, DENNIS PAddress1192 NE LIVINGSTON STREETAddress#8 RAILROAD AVENUECity-State-Zip:ARCADIA FL 34266City-State-Zip:HAINES CITY FL 33844

Title PAST PRESIDENT Title CEO, EXECUTIVE VICE PRESIDENT

Name WHEELER, MARK Name SPARKS, MICHAEL W

Address P O BOX 2715 Address 411 E ORANGE STREET

City-State-Zip: LAKE PLACID FL 33862 City-State-Zip: LAKELAND FL 33801-5054

Title ASSISTANT TREASURER Title PRESIDENT
Name METHENY, KEVIN E Name BLACK, LARRY

Address 411 E ORANGE STREET Address 1860 PINNACLE DRIVE
City-State-Zip: LAKELAND FL 33801-5054 City-State-Zip: LAKELAND FL 33813

## Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KEVIN E METHENY ASST

**ASST TREASURER** 

01/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name PRESCOTT, MICHAEL

Address P O BOX 43

City-State-Zip: WAUCHULA FL 33873

Title DIRECTOR

Name BATTAGLIA, ROBERT E Address 221 S KNOWLES AVE

City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR

Name BEER, BRYAN

Address 5998 SEARS ROAD

City-State-Zip: LABELLE FL 33975

Title VP - REGIONAL

Name FREEMAN, RICHARD H Address 640 E PLANT STREET

City-State-Zip: WINTER GARDEN FL 34787-3135

Title VP - REGIONAL Name MEADOR, PAUL

Address 1331 COMMERCE DRIVE

City-State-Zip: LABELLE FL 33935

Title DIRECTOR

Name JERKINS, WALTER JR.

Address P O BOX 690997

City-State-Zip: VERO BEACH FL 32969

Title DIRECTOR

Name MITCHELL, TOM

Address P O BOX 39

City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR

Name RUSSELL, ANDY

Address 109 ARRON DRIVE

City-State-Zip: LAKE PLACID FL 33852

Title VP - REGIONAL
Name BARBEN, JOHN
Address P O BOX 789

City-State-Zip: AVON PARK FL 33826

Title DIRECTOR

Name BECKER, FRAN

Address 4104 HWY 72 NW

City-State-Zip: ARCADIA FL 34265

Title DIRECTOR
Name EVANS, DAVID

Address 110 E BROADWAY STREET

City-State-Zip: OVIEDO FL 32765

Title DIRECTOR

Name CLONTS, REX

Address P O BOX 622916

City-State-Zip: OVIDEO FL 32762-2916

Title VP - REGIONAL

Name MONROE, MICHAEL

Address 7735 COUNTY ROAD 512

City-State-Zip: FELLSMERE FL 32948

Title DIRECTOR
Name PHILMON, TIM

Address 13542 HAPPY HILL ROAD
City-State-Zip: DADE CITY FL 33525

Title DIRECTOR

Name SKOUSEN, DANIEL
Address P O BOX 1317
City-State-Zip: RUSKIN FL 33575