

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H99778

**Entity Name:** BARBEN FRUIT COMPANY, INC.

**Current Principal Place of Business:**

21 EAST PINE STREET  
AVON PARK, FL 33825

**Current Mailing Address:**

21 EAST PINE STREET  
AVON PARK, FL 33825 US

**FEI Number: 59-2744700**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BARBEN, ROBERT H.  
1146 LAKE LOTELA DRIVE  
AVON PARK, FL 33825 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

**Officer/Director Detail :**

Title P  
Name BARBEN, ROBERT H  
Address 1146 LAKE LOTELA DRIVE  
City-State-Zip: AVON PARK FL 33825

Title ST  
Name BARBEN, MARY M  
Address 1146 LAKE LOTELA DRIVE  
City-State-Zip: AVON PARK FL 33825

Title VP  
Name BARBEN, JOHN P  
Address 1181 LAKE LOTELA DR  
City-State-Zip: AVON PARK FL 33825

Title VP  
Name WHITEHEAD, JOHN G  
Address 3721 CREEKSIDE DR  
City-State-Zip: SEBRING FL 33872

Title D  
Name BARBEN, WILLIAM M.  
Address 2093 HARTTS DESIRE LANE  
City-State-Zip: AVON PARK FL 33825

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBERT H BARBEN**

**MGRM**

**03/12/2025**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date