

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64307

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ORANGEFIELD CITRUS, INC.

**Current Principal Place of Business:**

7755 STARR LAKE RD  
BARTOW, FL 33830 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 362  
ALTURAS, FL 33820

**New Mailing Address:**

FEI Number: 59-3012630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MITCHELL, ROY D  
7755 STARR LAKE ROAD  
BARTOW, FL 33830 US

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

MITCHELL, ROY D  
7755 STARR LAKE ROAD  
BARTOW, FL 33830 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: ROY D MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: MITCHELL, ROY D  
Address: PO BOX 362 N/A  
City-St-Zip: ALTURAS, FL

Title: D ( ) Delete  
Name: OAKLEY, MILES L  
Address: P.O. BOX 369  
City-St-Zip: ALTURAS, FL 33820

Title: D ( ) Delete  
Name: MITHCELL, KRISTINE L.  
Address: P.O. BOX 362  
City-St-Zip: ALTURAS, FL 33820

Title: D (X) Delete  
Name: MITCHELL, II, ROY D.  
Address: P.O. BOX 362  
City-St-Zip: ALTURAS, FL 33820

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: MITCHELL, ROY D  
Address: PO BOX 362 N/A  
City-St-Zip: ALTURAS, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROY D MITCHELL

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date