2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000042931

Entity Name: DIVERSIFIED CITRUS MARKETING, INC.

FILED Jun 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 STATE ROAD 17 SOUTH LAKE HAMILTON, FL 33851 **Current Mailing Address: New Mailing Address:** PO BOX 658 LAKE HAMILTON, FL 33851 FEI Number: 59-3724134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHAAL, MARY 112 WALDEMAR CT SE US WINTER HAVEN, FL 33884 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BAUKNIGHT, JAMES DUNSON, LESLIE W III Name: Name: 2050 WEST LAKE HAMILTON DR. 6745 WINTERSET GARDENS RD Address: Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: WINTER HAVEN, FL 33884 Title: Title: DST () Delete DST (X) Change () Addition Name: WHEELER, IRVING Name: WATSON, CHARLES 9400 W LAKE RUBY 9400 W LAKE RUBY Address: Address: WINTER HAVEN, FL 33884 WINTER HAVEN, FL 33884 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CALLAHAM, STEVEN B Name: Name: 2823 SEQUOYAH DR. Address: Address: City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: Title: CD () Delete Title: () Change () Addition RALEY, WILLIAM L JR Name: Name: Address: 1325 N. LAKE OTIS DR. Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: Title: AST Title: () Delete () Change () Addition SCHAAL, MARY Name: Name: 112 WALDEMAR CT. SE Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: () Delete Title: PRES () Change (X) Addition Name: Name: BOBBY, BAWCUM 2710 COUNTRY CLUB RD Address: Address: City-St-Zip: City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY E SCHAAL AST 06/22/2005