

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000095002

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** GULF CITRUS HARVESTING & HAULING INC

**Current Principal Place of Business:**

890 SPRATT BLVD  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1347  
LABELLE, FL 33975

**New Mailing Address:**

**FEI Number:** 26-0838965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSH, JAMES L  
5280 RIVER BLOSSOM LANE  
LABELLE, FL 33935 US

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

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:**

Title: P  
Name: MARSH, JAMES L  
Address: 890 SPRATT BLVD  
City-St-Zip: LABELLE, FL 33935

Title: VP  
Name: MURRAY, GERALD W  
Address: 890 SPRATT BLVD  
City-St-Zip: LABELLE, FL 33935

Title: SEC  
Name: FLEMING, HAROLD R  
Address: 890 SPRATT BLVD  
City-St-Zip: LABELLE, FL 33935

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: JAMES L MARSH

P

04/26/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date