

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 391551

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** ALICO LAND DEVELOPMENT INC.

**Current Principal Place of Business:**

640 SOUTH MAIN STREET  
LA BELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 338  
LA BELLE, FL 33975 US

**New Mailing Address:**

**FEI Number:** 59-1376880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: CFO  
Name: WHITNEY, SCOTT R  
Address: 640 S MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: DC  
Name: ALEXANDER, JOHN R  
Address: 640 S MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: D  
Name: ALEXANDER, JD  
Address: 640 S MAIN STREET  
City-St-Zip: LABELLE, FL 33935

Title: S  
Name: DENISE, PLAIR  
Address: 640 S MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: P  
Name: DON, SCHROTENBOER  
Address: 640 SOUTH MAIN STREET  
City-St-Zip: LA BELLE, FL 33935

Title: T  
Name: LEWIS, STEVE  
Address: 640 SOUTH MAIN STREET  
City-St-Zip: LABELLE, FL 33975

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: DENISE PLAIR

SEC

03/02/2011

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

\_\_\_\_\_  
Date