

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 211482

FILED
Jan 30, 2009
Secretary of State

Entity Name: CITRUS ENTERPRISES INC

Current Principal Place of Business:

909 HWY 547 NORTH
DAVENPORT, FL 33837 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 65
DAVENPORT, FL 33836 US

New Mailing Address:

FEI Number: 59-0855784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKNIGHT, L W JR
59 B MOORE
HAINES CITY, FL 33844 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: MCKNIGHT, L.W., JR
Address: 59 B MOORE ROAD
City-St-Zip: HAINES CITY, FL

Title: VD () Delete
Name: MCKNIGHT, WILLIAM D.
Address: 18 EAST BAY ST. P.O. BOX 722
City-St-Zip: DAVENPORT, FL

Title: STD () Delete
Name: GLASS, VIRGINIA M.
Address: 1420 HORSESHOE CREEK RD.
City-St-Zip: DAVENPORT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: MCKNIGHT, WILLIAM D.
Address: 18 EAST BAY ST. P.O. BOX 722
City-St-Zip: DAVENPORT, FL 33836 US

Title: STD (X) Change () Addition
Name: GLASS, VIRGINIA M.
Address: 1420 HORSESHOE CREEK RD.
City-St-Zip: DAVENPORT, FL 33837 US

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: L. WARREN MCKNIGHT, JR.

TD

01/30/2009

Electronic Signature of Signing Officer or Director

_____ Date