2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 393042

Entity Name: SOUTHERN CITRUS NURSERIES, INC.

FILED Nov 04, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

5600 LAKE TRASK RD. DUNDEE, FL 33838

Current Mailing Address: New Mailing Address:

5600 LAKE TRASK RD.

DUNDEE, FL 33838

1895 ELOISE LOOP ROAD
WINTER HAVEN, FL 33884

FEI Number: 59-1377057 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:

THAYER, THOMAS JR.

3305 EAGLE TRACE

WINTER HAVEN, FL 33884 US

THAYER, THOMAS JR.

1895 ELOISE LOOP ROAD

WINTER HAVEN, FL 33884 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: THOMAS THAYER JR 11/04/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: THAYER, THOMAS JR Name: THAYER, THOMAS JR

Address: 3305 EAGLE TRACE Address: 1895 ELOISE LOOP ROAD City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: WINTER HAVEN, FL 33884

Title: S () Delete Title: () Change () Addition Name: THAYER, SUSAN Name:

 Address:
 P.O. BOX 1849
 Address:

 City-St-Zip:
 DUNDEE, FL 33838
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 DUNSON, VIRGINIA
 Name:

 Address:
 P.O. BOX 7771
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33883
 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: THOMAS THAYER JR P 11/04/2008