2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 518204

Entity Name: STORY CITRUS INC.

FILED Jun 10, 2009 Secretary of State

Ellilly Nai	ille: STORT	STRUS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
16030 HW LAKE WAI	Y 27 S LES, FL 33869	9 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 1 LAKE WAI	221 LES, FL 33859	91221 US			
FEI Number	: 59-1800300	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
LAKE WAI	'Y 27 SOUTH LES, FL 33859		e purpose of changing its registere	ed office or registered agent, or both,	
	e of Florida.				
SIGNATU					
Election Car	ce with s. 607.19	nic Signature of Registered A (3(2)(b), F.S., the corporation did g Trust Fund Contribution (). (TORS:	I not receive the prior notice.	Date ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (STORY, VICTO 16030 HWY 27 LAKE WALES,	' SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EVP (STORY, KYLE 16030 HWY 27 LAKE WALES,		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KYLE R. STORY EVP 06/10/2009