## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 551220** 

Entity Name: HICKORY BRANCH CORPORATION.

FILED Jan 12, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
20205 US HIGHWAY 27 C/O CITRUS WORLD LAKE WALES, FL 33859			20205 US HIGHWAY 27 C/O CITRUS WORLD LAKE WALES, FL 33853			
Current M	lailing Addres	ss:	New Mailing Address:			
PO BOX 3 IMMOKAL	8147 EE, FL 34143					
FEI Number	: 59-1788780	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and Address of New Registered Agent:			
CITRUS V 20205 US	WILLIAM J VORLD HIGHWAY 27 LES, FL 33853	3 US				
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing	its registered	d office or registered agent, or both,	
SIGNATU	RE:					
	Electror	nic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	ST () HENDRY, WILL 20205 US HIGH LAKE WALES,	HWAY 27	Title: Name: Address: City-St-Zip:	ST HENDRY, W 20205 US H LAKE WALE	•	
Title: Name: Address: City-St-Zip:	AS ( ) DUNN, MARK E 24 HIGHLAND A LEHIGH ACRES	AVE	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) CRUMBLY, DA' 20205 US HIGH LAKE WALES,	IWAY 27	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zin:	DP ( ) HUNT, FRANK I HUNT BROS RO LAKE WALES	OAD	Title: Name: Address: City-St-Zin:		( ) 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: MARK D DUNN AS 01/12/2009