

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 581178

FILED
Jun 01, 2009
Secretary of State

Entity Name: HULL CITRUS PROPERTIES, INC.

Current Principal Place of Business:

606 CHARLIE WIGGINS ROAD
PLANT CITY, FL 33567 US

New Principal Place of Business:

5702 S. CASSELS RD.
PLANT CITY, FL 33567 US

Current Mailing Address:

606 CHARLIE WIGGINS ROAD
PLANT CITY, FL 33567 US

New Mailing Address:

5702 S. CASSELS RD.
PLANT CITY, FL 33567 US

FEI Number: 59-1846319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRINKLE, ROBERT S
121 N COLLINS ST
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

HULL, THOMAS R VP
5702 S. CASSELS RD.
PLANT CITY, FL 33566 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 R. HULL

06/01/2009

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:

Title: VD () Delete
Name: HULL, TOM
Address: 5702 CASSELS RD
City-St-Zip: PLANT CITY, FL 33567

Title: P () Delete
Name: FUTCH, SUSANNA H
Address: 3680 SWINDELL RD
City-St-Zip: PLANT CITY, FL 33565

Title: PD () Delete
Name: HULL, JAMES H
Address: 1307 W HWY 60
City-St-Zip: PLANT CITY, FL 33567

Title: S () Delete
Name: HULL, SARAH BETH
Address: 502 W CHARLIE WIGNS RD
City-St-Zip: PLANT CITY, FL 33567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HULL, THOMAS R
Address: 5702 CASSELS RD
City-St-Zip: PLANT CITY, FL 33567

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

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

Title: () Change () Addition
Name:
Address:
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 R. HULL

VP

06/01/2009

Electronic Signature of Signing Officer or Director

Date