2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#790106

FILED Jan 12, 2006 Secretary of State

Entity Name: INDIAN RIVER CITRUS LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business: 7925 20TH STREET VERO BCH, FL 32966 **Current Mailing Address: New Mailing Address:** INDIAN RIVER CITRUS LEAGUE INC INDIAN RIVER CITRUS LEAGUE INC P.O. BOX 690007 P.O. BOX 690007 VERO BCH, FL 32966 US VERO BCH, FL 32969 US FEI Number: 59-0594030 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: BOURNIQUE, DOUGLAS C. 7925 20TH STREET VERO BEACH, FL 32960 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VCD () Change () Addition () Delete JACOBS, DARYL C Name: Name: 5795 GLEN EAGLE LN Address: Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: Title: PD () Delete Title: CD (X) Change () Addition ROBERTS, NATHANIEL Name: ROBERTS, NATHANIEL Name: Address: 4001 SEMINOLE PRATT WHITNEY ROAD Address: 4001 SEMINOLE PRATT WHITNEY ROAD City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: LOXAHATCHEE, FL 33470 Title: CD () Delete Title: PD (X) Change () Addition MINTON, JOHN MINTON, JOHN Name: Name: 4905 4TH STREET Address: Address: 4905 4TH STREET City-St-Zip: VERO BEACH, FL 32968 City-St-Zip: VERO BEACH, FL 32968 () Delete Title: VD Title: () Change () Addition SMITH, RAY Name: Name: 649 LAKE DRIVE Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: Title: () Delete Title: () Change () Addition BASS, JEFF Name: Name: 8465 OLD DIXIE HIGHWAY Address: Address: WABASSO, FL 32970 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GEORGE, STREETMAN Name: Name: Address: 677 LAKE DRIVE Address: VERO BEACH, FL 32963 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHANIEL ROBERTS CD 01/12/2006