## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 04, 2008 **DOCUMENT# 790182** Secretary of State

Entity Name: DUNDEE CITRUS GROWERS ASSOCIATION

**Current Principal Place of Business: New Principal Place of Business:** 

P.O. BOX 1739 111 N. 1ST STREET DUNDEE, FL 33838 DUNDEE, FL 33838

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1739

DUNDEE, FL 33838 US

FEI Number: 59-0226060 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:

SCHAEL, MARY SCHAAL, MARY

111 FIRST STREET NORTH 111 FIRST STREET NORTH DUNDEE, FL 33838 DUNDEE, FL 33838

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: MARY SCHAAL 08/04/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition WATSON, CHARLES E Name: Name:

9400 S RUBY LAKE DR Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip:

Title: VD Title: ( ) Delete () Change () Addition

OLSON, JOHN E, Name: Name: Address: 10 VAGABOND LN. Address: City-St-Zip: WINTER HAVEN, FL City-St-Zip:

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

CALLAHAM, STEVEN B Name: Name: 2823 SEQUOYAH DRIVE Address: Address: City-St-Zip: HAINES CITY, FL 33844 City-St-Zip:

Title: PCD ( ) Delete Title: () Change () Addition

Name: RALEY, LINDSAY W JR Name: Address: 208 PALMOLA ST Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

RUBUSH, JACK E Name: Name: 723 MAIN ST Address: Address: LAKE HAMILTON, FL 33851 City-St-Zip: City-St-Zip:

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

LANGLEY, MIKE R Name: Name: Address: 17628 US HWY 27 N Address: CLERMONT, FL 34711 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. LINDSAY RALEY, JR. **PCD** 08/04/2008