2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 790218

FILED Apr 29, 2008 Secretary of State

Entity Name: WINTER HAVEN CITRUS GROWERS ASSOCIATION

Current Principal Place of Business: New Principal Place of Business: 100 1ST STREET N DUNDEE, FL 33838 **Current Mailing Address: New Mailing Address:** C/O DEAROLF & MERENESS LLP 15425 N FLORIDA AVE TAMPA, FL 336131243 FEI Number: 59-0514475 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: LESLEY, JOHN T JR 804 S WOODLYN DR. TAMPA, FL 33609 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: () Delete () Change () Addition RACE, JOE B, Name: Name: 1242 11TH ST. NE Address: Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: Title: () Delete Title: () Change () Addition MARSHALL, CHALLIS Name: Name: Address: P. O. BOX 801 Address: City-St-Zip: WINTER HAVEN, FL 33882 City-St-Zip: Title: () Delete Title: () Change () Addition HARLEY, RICHARD C., Name: Name: 685 E PEARL ST Address: Address: City-St-Zip: BARTOW, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: GOODMAN, RICHARD C Name: Address: 222 N LASALLE ST., SUITE 2000 Address: City-St-Zip: CHICAGO, IL 60601 City-St-Zip: Title: () Delete Title: () Change () Addition SCHRADER, TED Name: Name: P.O. BOX 2302 Address: Address: City-St-Zip: SAINT LEO, FL 33574 City-St-Zip: Title: () Delete Title: () Change () Addition ALTMAN, ALLEN Name: Name: Address: 12445 US HWY 301 Address: DADE CITY, FL 33525 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: JOHN T. LESLEY, JR. EXVP 04/29/2008