

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F43960

**FILED**  
**Mar 22, 2006**  
**Secretary of State**

**Entity Name:** TROPICAL SUN CITRUS, INC.

**Current Principal Place of Business:**

PO BOX 1088  
AUDURNDALE, FL 33823 US

**New Principal Place of Business:**

36433 LAKE PASADENA ROAD  
DADE CITY, FL 335260159 US

**Current Mailing Address:**

36441 LAKE PASADENA RD  
DADE CITY, FL 33525 US

**New Mailing Address:**

PO BOX 159  
DADE CITY, FL 33525 US

**FEI Number:** 59-2123400

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUCY, VICKI M  
2270 PALM VIEW CIRCLE  
AUBURNDALE, FL 33823 US

**Name and Address of New Registered Agent:**

BUCY, VICKI M  
36433 LAKE PASADENA ROAD  
DADE CITY, FL 33525 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: VICKI M. BUCY

03/22/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BUCY, RICKEY D  
Address: PO BOX 1088  
City-St-Zip: AUDURNDALE, FL 33823 US

Title: VP ( ) Delete  
Name: BUCY, VICKI M  
Address: PO BOX 1088  
City-St-Zip: AUDURNDALE, FL 33823 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BUCY, RICKEY D  
Address: PO BOX 159  
City-St-Zip: DADE CITY, FL 335260159 US

Title: VP (X) Change ( ) Addition  
Name: BUCY, VICKI M  
Address: PO BOX 159  
City-St-Zip: DADE CITY, FL 33526-015 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICKI M. BUCY

VP

03/22/2006

Electronic Signature of Signing Officer or Director

Date