

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G93723

Entity Name: L.O. CITRUS, INC.

FILED
Feb 07, 2008
Secretary of State

Current Principal Place of Business:

1890 98TH AVENUE
VERO BEACH, FL 32966 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 690772
VERO BEACH, FL 32969 US

New Mailing Address:

FEI Number: 59-2408996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTH, JAMES N
3045 10TH CT
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORTH, JAMES N
Address: 3045 10TH COURT
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: LYSNE, S G
Address: 109 PRESTWICK CIR
City-St-Zip: VERO BEACH, FL 32967

Title: ST () Delete
Name: WILLIAMS, LYNN L
Address: 5870 GLEN EAGLE LN
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: MILLER, MARY O
Address: 1106 29TH AVE
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LYNN L. WILLIAMS

ST

02/07/2008

Electronic Signature of Signing Officer or Director

Date