

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # H95611 (0)
1. Corporation Name
CITRUS PINES, INC.

Principal Place of Business 2160 SE 31 ST. OCALA FL 34471	Mailing Address 2160 SE 31 ST. OCALA FL 34471
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2403 SE 17TH ST 22 101 23 Ocala FL 24 34471	2a. Mailing Address 26 2403 SE 17TH ST 27 SUITE 101 28 Ocala, FL 29 34471	3. Date Incorporated or Qualified 01/23/1986	3a. Date of Last Report 04/16/1996	4. FEI Number 59-2835299	Applied For Not Applied	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---	---	---------------------------------------	-----------------------------	----------------------------	--	--	--

9. Name and Address of Current Registered Agent HILLS, RONALD D 2160 SE 31 ST. OCALA FL 34471	10. Name and Address of New Registered Agent 81 Name RONALD D. HILLS 82 Street Address (P.O. Box Number is Not Acceptable) 2403 SE 17TH ST 83 SUITE 101 84 City Ocala FL 85 Zip Code 34471
--	---

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Ronald D. Hills 9/3/97
Signature, typed or printed name of registered agent, and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP PSD HILLS, RONALD D SR. 2160 SE 31 ST. OCALA FL 34471	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP HILLS, RONALD D. SR. 2403 SE 17TH ST OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Ronald D. Hills 9/3/97 352-351-3411

CR2E034 (4/97)