

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J01874

Entity Name: ORANGE PICKERS, INC.

FILED  
Apr 18, 2011  
Secretary of State

**Current Principal Place of Business:**

2798 GARZA RD  
ZOLFO SPRINGS, FL 33890 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1017  
ZOLFO SPRINGS, FL 33890 US

**New Mailing Address:**

FEI Number: 59-2652367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMPSON, MIKE  
2798 GARZA RD  
ZOLFO SPRINGS, FL 33890 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GUERNDT, H. FRED  
Address: 2701 LAKE DAMON RD.  
City-St-Zip: AVON PARK, FL 33834

Title: VD  
Name: THOMPSON, MIKE  
Address: 2447 STEVE ROBERTS  
City-St-Zip: ZOLFO SPRINGS, FL 33840

Title: STD  
Name: THOMPSON, KENNETH E.  
Address: 930 WISTERIA CT  
City-St-Zip: WAUCHULA, FL 33873

I hereby 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 all other like empowered.

SIGNATURE: MIKE THOMPSON

VD

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date