

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95394

FILED
May 26, 2004
Secretary of State

Entity Name: FIRST ATLANTIC CITRUS, INC.

Current Principal Place of Business:

4420 NORTH OLD DIXIE
VERO BEACH, FL 32967 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 429
VERO BEACH, FL 329610429 US

New Mailing Address:

FEI Number: 65-0139817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PACK, SANDY
4420 N OLD DIXIE
VERO BEACH, FL 32967 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GROVES, DON
Address: 4420 N OLD DIXIE
City-St-Zip: VERO BEACH, FL

Title: VD () Delete
Name: VALDES, ALBERT
Address: 4420 NORTH OLD DIXIE
City-St-Zip: VERO BEACH, FL

Title: VD () Delete
Name: GROVES, PAMELA
Address: 4420 NORTH OLD DIXIE
City-St-Zip: VERO BEACH, FL

Title: STD () Delete
Name: PACK, SANDY
Address: 4420 NORTH OLD DIXIE
City-St-Zip: VERO BEACH, FL

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 for the exemption stated in Section 119.07(3)(i), 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: SANDY PACK

STD

05/26/2004

Electronic Signature of Signing Officer or Director

Date