


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 17, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L04000082874</b>	
1. Entity Name CDA CITRUS, LLC	

Principal Place of Business 400 EAGLE LAKE LOOP ROAD EAST WINTER HAVEN, FL 33884	Mailing Address 400 EAGLE LAKE LOOP ROAD EAST WINTER HAVEN, FL 33884
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DO NOT WRITE IN THIS SPACE



04032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2000712	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  ALEXANDER, MATTHEW D 141 5TH STREET N.W. WINTER HAVEN, FL 33883
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DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

DATE  
05/01/08-80026-005 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COUNTER, CHARLES 2085 LAKE HAMILTON DRIVE WEST WINTER HAVEN, FL 33881
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DUNSON, LESLIE W III 400 EAGLE LAKE LOOP ROAD EAST WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ALEXANDER, MATTHEW D 119 WYNDHAM DRIVE WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  **4/2/08** **863 293 2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #