2008 FOR PROFIT CORPORATION

SIGNATURE:

FILED ANNUAL REPORT Jan 09, 2008 08:00 AN **DOCUMENT # L21985** Secretary of State 1. Entity Name CENTER STATE CITRUS, INC. Principal Place of Business Mailing Address P.O. BOX 340 1936 HWY 2 WESTVILLE, FL 32464 US WESTVILLE, FL 32464 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2978633 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent KANDZER, SARA B DO NOT WRITE 1936 HIGHWAY 2 WESTVILLE, FL 32464 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITI F NAME KANDZER, BRETT A. 1936 HWY 2 STREET ADDRESS WESTVILLE, FL 32464 CITY-ST-ZIP U00000776091 TITLE 01/09/08-80012-003 150.00 KANDZER, SARA NAME 1936 HWY 2 STREET ADDRESS WESTVILLE, FL 32464 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 or supplemental 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 professe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with

850-956-3011