

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M73155

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: CHARLOTTE CITRUS, INC.

## Current Principal Place of Business:

C/O ALFRED M. JOHNS  
ONE WOODLAND DRIVE  
PUNTA GORDA, FL 339829690

## New Principal Place of Business:

C/O ELWOOD P. SAFRON  
2323 SANDY PINE DRIVE  
PUNTA GORDA, FL 33982

## Current Mailing Address:

C/O ALFRED M. JOHNS  
ONE WOODLAND DRIVE  
PUNTA GORDA, FL 339829690

## New Mailing Address:

C/O ELWOOD P. SAFRON  
2323 SANDY PINE DRIVE  
PUNTA GORDA, FL 33952

FEI Number: 65-0037664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNS, ALFRED M.  
ONE WOODLAND DRIVE  
PUNTA GORDA, FL 33982 US

## Name and Address of New Registered Agent:

SAFRON, ELWOOD P  
2323 SANDY PINE DRIVE  
PUNTA GORDA, FL 33982 US

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: ELWOOD P. SAFRON

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JOHNS, ALFRED M.,  
Address: ONE WOODLAND DRIVE  
City-St-Zip: PUNTA GORDA, FL

Title: VSD ( ) Delete  
Name: SAFRON, ELWOOD P  
Address: 2323 SANDY PINE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33982

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SAFRON, ELWOOD P  
Address: 2323 SANDY PINE DRIVE  
City-St-Zip: PUNTA GORDA, FL 33982

Title: VD (X) Change ( ) Addition  
Name: JOHNS, KEVIN A  
Address: 3840 BORDEAUX DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: STD ( ) Change (X) Addition  
Name: STEPHENSON, JACK F  
Address: 796 BIRDIE VIEW POINT  
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ELWOOD P. SAFRON

PD

03/26/2009

Electronic Signature of Signing Officer or Director

Date