2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2012
Secretary of State

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Entity Name: CITRICORP, INC.

Current Principal Place of Business:

1511 US 27 SOUTH
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 985
LAKE PLACID, FL 33862 US

New Mailing Address:

FEI Number: 59-3024538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIGSBY, RONALD P
1511 US 27 SOUTH
LAKE PLACID, FL 33852 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: D
Name: GRIGSBY, SAMUEL F JR
Address: 3006 WILSHIRE BLVD.
City-St-Zip: MORRISTOWN, TN 37814 US

Title: D
Name: GRIGSBY, RONALD P
Address: 1511 US 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D
Name: GULLEY, JAMES W
Address: 4512 OLD CARRIAGE TR.
City-St-Zip: OVIEDO, FL 32765 US

Title: D
Name: GRIGSBY, LESLIE B
Address: 3006 WILSHIRE BLVD.
City-St-Zip: MORRISTOWN, TN 37814 US

Title: D
Name: GRIGSBY, CATHARINE E
Address: 1511 US 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D
Name: GULLEY, MARTHA G
Address: 4512 OLD CARRIAGE TR.
City-St-Zip: OVIEDO, FL 32765 US

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: RONALD P. GRIGSBY D 03/22/2012

Electronic Signature of Signing Officer or Director Date