## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 28, 2008 08:00 AN Secretary of State DOCUMENT # M92830 FLORIDA CITRUS SALES, INC. Principal Place of Business Mailing Address 7355 S.W. 9TH STREET 7355 S.W. 9TH STREET VERO BEACH, FL 32968 VERO BEACH, FL 32968 04172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0074739 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HAMNER JR., GEORGE F. DO NOT WRITE 7355 S.W. 9TH ST. VERO BEACH, FL 32968 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, typed or printed name of registered agent and title if applicable (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. TITLE NAME HAMNER, GEORGE F., JR. STREET ADDRESS 7355 SW 9TH ST CITY-ST-ZIP VERO BEACH, FL TITLE HAMNER, GEORGE F JR NAME STREET ADDRESS 7355 SW 9TH ST CITY-ST-ZIP VERO BEACH, FL NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY - ST - ZIP TITLE NAME

12. Thereby certify that the information supplied with this filling 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 trustee 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 an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED NAME OF NING OFFICER OR DIRECTOR