

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008926

Entity Name: MISSION IN CITRUS INC

FILED  
May 18, 2009  
Secretary of State

## Current Principal Place of Business:

548 SOUTH LEONA AVE  
LECANTO, FL 34461

## New Principal Place of Business:

2488 NORTH PENNSYLVANIA AVE  
CRYSTAL RIVER, FL 34428

## Current Mailing Address:

548 SOUTH LEONA AVE  
LECANTO, FL 34461

## New Mailing Address:

2488 NORTH PENNSYLVANIA AVE  
CRYSTAL RIVER, FL 34428

FEI Number: 26-3423299      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

SLEIGHTER, JAMES  
548 SOUTH LEONA AVE  
LECANTO, FL 34461      US

## Name and Address of New Registered Agent:

SLEIGHTER, JAMES  
2488 NORTH PENNSYLVANIA AVE  
CRYSTAL RIVER, FL 34428      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: \_\_\_\_\_

05/18/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SLEIGHTER, JAMES  
Address: 548 SOUTH LEONA AVE  
City-St-Zip: LECANTO, FL 34461

Title: VP ( ) Delete  
Name: SLEIGHTER, CHARLES E SR  
Address: 1311 SOUTH FIFTH STREET  
City-St-Zip: CHAMBERSBURG, PA 17201

Title: T ( ) Delete  
Name: PRUITT, JAMES  
Address: 548 SOUTH LEONA AVE  
City-St-Zip: LECANTO, FL 34461

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SLEIGHTER, JAMES  
Address: 2488 NORTH PENNSYLVANIA AVE  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: BRUCE, JANEEN  
Address: 616 W HERONSBILL LN  
City-St-Zip: CITRUS SPRINGS, FL 34434

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES SLEIGHTER

P

05/18/2009

Electronic Signature of Signing Officer or Director

Date