

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 19, 2012
Secretary of State

DOCUMENT# N27597

Entity Name: COLLIER CITRUS GROWERS DRAINAGE ASSOCIATION, INC.**Current Principal Place of Business:**3595 RANCH ONE ROAD
IMMOKALEE, FL 34142**New Principal Place of Business:****Current Mailing Address:**P O BOX 3147
IMMOKALEE, FL 341433147 US**New Mailing Address:****FEI Number:** 59-0155622**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSENTHAL, PAUL E.
111 NORTH ORANGE AVENUE
SUITE 1800
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**MURPHY, MICHAEL S SR.
224 DAVID AVE
LEHIGH ACRES, FL 33936 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: MICHAEL S. MURPHY SR.

01/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST
Name: MURPHY, MICHAEL S
Address: 224 DAVID AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DP
Name: ENGLISH, J. EDWIN
Address: RT. 2 BOX 421
City-St-Zip: IMMOKALEE, FL 33934

Title: D
Name: ENGLISH, JOSEPH
Address: 981 GLENN AVENUE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D
Name: FISCHER, EVERETTE H.
Address: 75 2ND STREET
City-St-Zip: WINTER GARDEN, FL 34777

Title: VP
Name: CRUMBLY, DAVID
Address: 20205 US HIGHWAY 27
City-St-Zip: LAKE WALES, FL 33853

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

SIGNATURE: MICHAEL S. MURPHY SR.

ST

01/19/2012

Electronic Signature of Signing Officer or Director

Date