## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000002714

FILED Jan 18, 2006 Secretary of State

Entity Name: PEACE RIVER VALLEY CITRUS GROWERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10 EAST OAK ST SUITE B

ARCADIA, FL 34266 US

Current Mailing Address: New Mailing Address:

10 EAST OAK ST SUITE B

ARCADIA, FL 34266 US

FEI Number: 65-0421330 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANDERS, KEN TAYLOR, HUGH

PO BOX 1149 11401 A.D. TAYLOR ROAD WAUCHULA, FL 33873 US MYAKKA CITY, FL 34251 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: HUGH TAYLOR 01/18/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P/D ( ) Delete Title: P/D (X) Change ( ) Addition

Name: SANDERS, KEN Name: TAYLOR, HUGH

 Address:
 PO BOX 1149
 Address:
 11401 A.D. TAYLOR ROAD

 City-St-Zip:
 WAUCHULA, FL 33873 US
 City-St-Zip:
 MYAKKA, FL 34251 US

Name: TAYLOR, HUGH Name: TURNER, MALCOME

Address: 11401 A.D. TAYLOR ROAD Address: 2173 NE WASHINGTON STREET

City-St-Zip: MYAKKA CITY, FL 34251 US City-St-Zip: ARCADIA, FL 34266 US

Title: T/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HOOPINGARNER, LOU
 Name:

 Address:
 143 SOUTH OCEOLA AVENUE
 Address:

 City-St-Zip:
 ARCADIA, FL 34266 US
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: KRAUSE, ROBERT Name: BATEMAN, HOWARD

Address: 2807 RALPH JOHNS ROAD Address: 1114 S. E. LAKE BROWNING GRADE

City-St-Zip: WAUCHULA, FL 33873 US City-St-Zip: ARCADIA, FL 34266 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LOU HOOPINGARNER T/D 01/18/2006

Electronic Signature of Signing Officer or Director

Date