2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9900000350

FILED Jan 18, 2011 Secretary of State

Entity Name: CITRUS RESEARCH AND EDUCATION FOUNDATION, INC.

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

700 EXPERIMENT STATION ROAD LAKE ALFRED, FL 33850

Current Mailing Address: New Mailing Address:

700 EXPERIMENT STATION ROAD LAKE ALFRED, FL 33850

FEI Number: 59-3571798 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:

BURNS, JACQUELINE K PH.D. 700 EXPERIMENT STATION ROAD LAKE ALFRED, FL 33850 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DR

Name: MCLELLAN, MARK R Address: 1022 MCCARTY HALL City-St-Zip: GAINESVILLE, FL 32611

Title: DR.

Name: FERRER, MILLIE
Address: 1038 MCCARTY HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: F

Name: HUNT, ELLIS JR

Address: HUNT BROS.COOP POB 631 City-St-Zip: LAKE WALES, FL 33859

Title: ED

Name: JACQUELINE, BURNS K

Address: 700 EXPERIMENT STATTION RD City-St-Zip: LAKE ALFRED, FL 33850

Title: VP

Name: SUTTON, BRENT
Address: 312 N BUENA VISTA DR
City-St-Zip: LAKE ALFRED, FL 33850

Title: ST

Name: HART, TOM Address: 1657 CRUMP RD

City-St-Zip: WINTER HAVEN, FL 33881

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: JACQUELINE K. BURNS ED 01/18/2011