

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115304

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: CITRUS ELITE OF FLORIDA, INC.

## Current Principal Place of Business:

305 AVE  
WINTER HAVEN, FL 33880

## New Principal Place of Business:

2001 THOMPSON NURSERY ROAD  
LAKE WALES, FL 33859

## Current Mailing Address:

PO BOX 1594  
WINTER HAVEN, FL 33882

## New Mailing Address:

FEI Number: 59-3691765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHUFORD, JAMES E  
305 AVE E S.W.  
WINTER HAVEN, FL 33880      US

## Name and Address of New Registered Agent:

SHUFORD, JAMES E  
2001 THOMPSON NURSERY ROAD  
LAKE WALES, FL 33859      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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: ABE, TAKAAKI  
Address: 305 AVE E S.W.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: VSTD ( ) Delete  
Name: SHUFORD, JAMES E  
Address: 305 AVE E S.W.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: DV ( ) Delete  
Name: HIROAKI, ABE  
Address: 305 AVE E SW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: CFO ( ) Delete  
Name: MOORE, EDWARD C  
Address: 305 AVE E SW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: DV ( ) Delete  
Name: ABE, ISAO  
Address: 305 AVE E SW  
City-St-Zip: WINTER HAVEN, FL 33880

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: ABE, TAKAAKI  
Address: 2001 THOMPSON NURSERY ROAD  
City-St-Zip: LAKE WALES, FL 33880

Title: VSTD (X) Change ( ) Addition  
Name: SHUFORD, JAMES E  
Address: 2001 THOMPSON NURSERY ROAD  
City-St-Zip: LAKE WALES, FL 33859

Title: DV (X) Change ( ) Addition  
Name: HIROAKI, ABE  
Address: 2001 THOMPSON NURSERY ROAD  
City-St-Zip: LAKE WALES, FL 33859

Title: CFO (X) Change ( ) Addition  
Name: MOORE, EDWARD C  
Address: 2001 THOMPSON NURSERY ROAD  
City-St-Zip: LAKE WALES, FL 33859

Title: DV (X) Change ( ) Addition  
Name: ABE, ISAO  
Address: 2001 THOMPSON NURSERY ROAD  
City-St-Zip: LAKE WALES, FL 33859

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

SIGNATURE: EDWARD C MOORE

CFO

04/21/2009

Electronic Signature of Signing Officer or Director

Date