## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** May 03, 2007 08:00 AM Secretary of State

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VILLÁ CITRUS OF CENTRAL FLORIDA, INC.



Principal Place of Business

Mailing Address

210 NORTH THIRD AVENUE WAUCHULA, FL 33873

P.O. BOX 1264 Wauchula, FL 33873



## DO NOT WRITE IN THIS SPACE

04202007	No Chg-P	CR2	E034 (11/05)
4. FEI Number			Applied For
20-1934	853		Not Applicable
5. Certificate of	of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, CARLOS N 4757 SWEETWATER ROAD ZOLFO SPRINGS, FL 33890

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the pions of registered agent.	urpose of changing its re	gistered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little	applicable (NOTE R	legistered Agent signature	required when reinstating)	DATE
	É NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	, ,		
TITLE	PST				•
NAME	BAILEY, CARLOS N				
STREET ADDRESS	4757 SWEETWATER ROAD		•	*	
CITY ST-ZIP	ZOLFO SPRINGS, FL 33890				
TITLE					! ያሳሴሴሴሴግምዕራብድ
NAME					U00000759026
STREET ADDRESS					05/24/07-80026-004 150.00
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12. I hereby o	sertify that the information supplied with this file	ing does not qualify for the	ne exemptions con	tained in Chapter 11:	9, Florida Statutes. I further certify that the information

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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