

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000171163

FILED
Jul 25, 2008
Secretary of State**Entity Name:** DOUBLE D CITRUS DEALERS INC**Current Principal Place of Business:**1504 HWY 557A
POLK CITY, FL 33868**New Principal Place of Business:****Current Mailing Address:**1504 HWY 557A
POLK CITY, FL 33868 US**New Mailing Address:****FEI Number:** 20-1994976**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GREEN, PAMELA A
1104 CYPRESS GARDENS BLVD
SUITE D
WINTER HAVEN, FL 33884 US**Name and Address of New Registered Agent:**

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:** P () Delete
Name: PATE, DENNIS D JR
Address: 1310 LOOP RD
City-St-Zip: AUBURNDALE, FL 33823 US**Title:** VP () Delete
Name: PATE, DANIEL
Address: 1310 LOOP RD
City-St-Zip: AUBURNDALE, FL 33825**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: PATE, DENNIS D JR
Address: 880 BUENA VISTA DR
City-St-Zip: LAKE ALFRED, FL 33850 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: DENNIS D PATE JR

P

07/25/2008

Electronic Signature of Signing Officer or Director_____
Date