

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35979

FILED
Apr 18, 2005
Secretary of State

Entity Name: SUN GROWN CITRUS, INC.

Current Principal Place of Business:

1857 KELLER ROAD
P. O. BOX 208
FT MEADE, FL 33841 US

New Principal Place of Business:

Current Mailing Address:

701 HARGER ROAD
SUITE 190
OAK BROOK, IL 60523 US

New Mailing Address:

FEI Number: 36-3779440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHERN BAKERIES, INC.
ATTN: ARTHUR KRANTZ
3355 W. MEMORIAL BLVD.
LAKELAND, FL 33801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: SCHUSTER, STEPHEN M
Address: 701 HARGER ROAD STE 190
City-St-Zip: OAK BROOK, IL

Title: T () Delete
Name: KRANTZ, ARTHUR H.,
Address: 701 HARGER ROAD, #190
City-St-Zip: OAK BROOK, IL

Title: VD () Delete
Name: GUSTAFSON, F. EDWARD,
Address: 701 HARGER ROAD, #190
City-St-Zip: OAK BROOK, IL

Title: P () Delete
Name: BARNETT, JOHN CONNALLY
Address: 1857 KELLER ROAD
City-St-Zip: FT MEADE, FL

Title: D () Delete
Name: KELLY, DONALD P
Address: 701 HARGER RD. STE. 190
City-St-Zip: OAK BROOK, IL 60523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN M. SCHUSTER

V

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date