

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000094246

Entity Name: GENE'S CITRUS RANCH, INC.

FILED
Jan 13, 2007
Secretary of State

Current Principal Place of Business:

4805 BUCKEYE ROAD
PALMETTO MANATEE, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 996
PALMETTO, FL 342200996 US

New Mailing Address:

FEI Number: 65-0547216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIXON, SCOTT
4805 BUCKEYE ROAD
PALMETTO, FL 34221 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: D () Delete
Name: MIXON, EUGENE A
Address: 3412 10 LN W
City-St-Zip: PALMETTO, FL 34221

Title: V () Delete
Name: MIXON, R E
Address: 11300 O'NEIL ROAD
City-St-Zip: PALMETTO, FL 34221

Title: P () Delete
Name: MIXON, SCOTT S
Address: 2833 48TH WAY EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: MIXON, CAROLE P
Address: 3412 10TH LN W
City-St-Zip: PALMETTO, FL 34221

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT S MIXON

P

01/13/2007

Electronic Signature of Signing Officer or Director

Date