

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000050837

1. Entity Name
CITRUS MINING & TIMBER, INC.



Principal Place of Business
**14280 W HOLLINSWOOD TRL
INGLIS, FL 34449**

Mailing Address
**POST OFFICE BOX 277
CRYSTAL RIVER, FL 34423 US**



04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3323941

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**FISHER & SAULS, P.A.
100 SECOND AVENUE SOUTH
SUITE 701
ST. PETERSBURG, FL 33701**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	HOLLINS, DIXIE M
STREET ADDRESS	14280 W HOLLINSWOOD TRAIL
CITY - ST - ZIP	INGLIS, FL 34449
TITLE	VP
NAME	ADOCK, LOUIE N JR
STREET ADDRESS	100 SECOND AVENUE SOUTH SUITE 701
CITY - ST - ZIP	ST. PETERSBURG, FL
TITLE	AS
NAME	LAWLER, JUDY A.
STREET ADDRESS	100 SECOND AVENUE SO #701
CITY - ST - ZIP	ST. PETERSBURG, FL
TITLE	AS
NAME	POLSON, MARILYN M
STREET ADDRESS	100 SECOND AVENUE SOUTH , SUITE 701
CITY - ST - ZIP	ST. PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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05/01/06-80055-011 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

DIXIE M. HOLLINS

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 13, 2006 (352) 447-5329

Date

Daytime Phone #