

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000052854

**Entity Name:** M. H. SERVICES OF CITRUS, INC.

**FILED**  
**Mar 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7075 W HOMOSASSA TRAIL  
HOMOSASSA, FL 34448

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2879  
HOMOSASSA SPRNGS, FL 34447

**New Mailing Address:**

FEI Number: 59-3452220      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RYALS, CHARLES T  
385 S. GRANNY PT  
LECANTO, FL 34461    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: PSD  
Name: RYALS, CHARLES T  
Address: 385 S. GRANNY PT  
City-St-Zip: LECANTO, FL 34461

I hereby 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 all other like empowered.

SIGNATURE: CHARLES T. RYALS

PRES

03/20/2011

Electronic Signature of Signing Officer or Director

Date