2008 FOR PROFIT CORPORATION ... ANNUAL REPORT

DOCUMENT # P98000084533

1. Entity Name

D & L CITRUS HOLDINGS, INC.



FILED Mar 14, 2008 08:00 A Secretary of State

Principal Place of Business

404 S 6TH AVE

WAUCHULA, FL 33873

Mailing Address

P.O. BOX 430 WAUCHULA, FL



DO NOT WRITE IN THIS SPACE

03062008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0866262

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMBERT, KENNETH A 235 TERRELL RD WAUCHULA, FL 33873

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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 Flori	ta. 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, 2008 Fee will be \$550.00

 Election Cempaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

	ay 1, 2006 Fee will be \$330.00	
10.	OFFICERS AND DIREC	CTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMBERT, KENNETH A 235 TERRELL RD WAUCHULA, FL 33873	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVIS, JAMES S 10534 SCOTT MILL RD. JACKSONVILLE, FL 32256	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAMBERT, EILEEN M 235 TERRELL RD WAUCHULA, FL 33873	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, RUTH ANN 10534 SCOTT MILL RD. JACKSONVILLE, FL 32256	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	v
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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DO NOT WRITE 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.

CICMATIDE.

Few A John

3/2/08

863-173-5055