2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S03230

Entity Name: J & S CITRUS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
PO BOX 1297 ARCADIA, FL 34265 US	1261 RIVERBEND DR LABELLE, FL 33935 US
Current Mailing Address:	**New Mailing Address:**
PO BOX 1297 ARCADIA, FL 34265 US	

FEI Number: 59-3045005   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WALDRON, EUGENE W JR. 124 N. BREVARD AVE. ARCADIA, FL 33821 US	

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D ( ) Delete	Title:	( ) Change ( ) Addition
Name:	STRICKLAND, DONNA M	Name:	
Address:	1261 RIVERBEND DRIVE	Address:	
City-St-Zip:	LABELLE, FL 33975	City-St-Zip:	
Title:	DP ( ) Delete	Title:	( ) Change ( ) Addition
Name:	HOVEY, SUSAN Y	Name:	
Address:	4827 SE HWY 70	Address:	
City-St-Zip:	ARCADIA, FL	City-St-Zip:	
Title:	DVP ( ) Delete	Title:	( ) Change ( ) Addition
Name:	HOVEY, DONALD W	Name:	
Address:	4827 SE HWY 70	Address:	
City-St-Zip:	ARCADIA, FL	City-St-Zip:	
Title:	MDST ( ) Delete	Title:	( ) Change ( ) Addition
Name:	STRICKLAND, RICHARD K	Name:	
Address:	1261 RIVERBEND DRIVE	Address:	
City-St-Zip:	LABELLE, FL 33975	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD K STRICKLAND   MDST   01/08/2009

 Electronic Signature of Signing Officer or Director   Date