

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S89875

**FILED**  
**Feb 24, 2010**  
**Secretary of State**

**Entity Name:** HARVEY FENDER CITRUS NURSERY, INC.

**Current Principal Place of Business:**

112 STATE ROAD 50  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

112 STATE ROAD 50  
GROVELAND, FL 34736

**New Mailing Address:**

**FEI Number:** 65-0289654

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FENDER, HARVEY C.  
112 SR 50  
GROVELAND, FL 34736 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:** PD  
**Name:** FENDER, HARVEY C.  
**Address:** 112 STATE ROAD 50  
**City-St-Zip:** GROVELAND, FL

**Title:** STD  
**Name:** FENDER, JUNE  
**Address:** 112 STATE ROAD 50  
**City-St-Zip:** GROVELAND, FL

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:** JUNE FENDER

STD

02/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date