

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V34193

FILED
Oct 06, 2009
Secretary of State**Entity Name:** GULF CITRUS MANAGEMENT, INC.**Current Principal Place of Business:**5377 DUNCAN RD
PUNTA GORDA, FL 33982**New Principal Place of Business:****Current Mailing Address:**POB 512116
PUNTA GORDA, FL 33951**New Mailing Address:**P.O. BOX 512116
PUNTA GORDA, FL 33951**FEI Number:** 65-0332888**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WINSLOW, GEORGE A
5377 DUNCAN RD
PUNTA GORDA, FL 33982 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: PTS () Delete
Name: WINSLOW, GEORGE A
Address: PO BOX 512116
City-St-Zip: PUNTA GORDA, FL 33951

Title: VP (X) Delete
Name: WALTERS, FREDRICK H
Address: PO BOX 512116
City-St-Zip: PUNTA GORDA, FL 33951

Title: VP (X) Delete
Name: PIKE, ANDREW
Address: PO BOX 512116
City-St-Zip: PUNTA GORDA, FL 33951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: GEORGE A. WINSLOW

PTS

10/06/2009

Electronic Signature of Signing Officer or Director_____
Date