2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004057

Entity Name: CITRUS RESEARCH AND DEVELOPMENT FOUNDATION, INC.

FILED
Mar 08, 2024
Secretary of State
5595128944CC

Current Principal Place of Business:

700 EXPERIMENT STATION ROAD LAKE ALFRED, FL 33850

Current Mailing Address:

700 EXPERIMENT STATION ROAD LAKE ALFRED, FL 33850

FEI Number: 26-4825142 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FORD, MICHAEL W ROOM 123, TIGERT HALL UNIVERSITY OF FLORIDA GAINESVILLE, FL 32611-3125 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

Officer/Director Detail:

Title PRESIDENT Title VP

Name PORTER, MORGAN Name SHERROD, JOBY

Address 700 EXPERIMENT STATION ROAD Address 700 EXPERIMENT STATION ROAD

City-State-Zip: LAKE ALFRED FL 33850 City-State-Zip: LAKE ALFRED FL 33850

TitleCOOTitleTREASURERNameDANTZLER, RICHARD E.NameMAHAN, RON

Address 700 EXPERIMENT STATION ROAD Address 700 EXPERIMENT STATION ROAD

City-State-Zip: LAKE ALFRED FL 33850 City-State-Zip: LAKE ALFRED FL 33850

Title SECRETARY Title OFFICE MANAGER

Name HAMNER, GEORGE JR. Name NOWICKI, AUDREY ANN

Address 700 EXPERIMENT STATION ROAD Address 700 EXPERIMENT STATION ROAD

City-State-Zip: LAKE ALFRED FL 33850 City-State-Zip: LAKE ALFRED FL 33850

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AUDREY A NOWICKI

OFFICE MANAGER

03/08/2024