

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000001413

**Entity Name:** FLORIDA CITRUS CENTER, INC.

**Current Principal Place of Business:**

11765 N. US 301  
OXFORD, FL 34484

**Current Mailing Address:**

11765 N. US 301  
OXFORD, FL 34484 US

**FEI Number:** 59-3165555

**Certificate of Status Desired:** No

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

JENNINGS, EDWARD A  
2819 C.R. 415  
LAKE PANASOFFKEE, FL 33538 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           | P                  | Title           | VICE                |
| Name            | JENNINGS, EDWARD A | Name            | JENNINGS, DEBORAH D |
| Address         | 11765 N. US 301    | Address         | 11765 N. US 301     |
| City-State-Zip: | OXFORD FL 34484    | City-State-Zip: | OXFORD FL 34484     |

*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:** EDWARD A JENNINGS

**PRESIDENT**

**01/25/2016**

Electronic Signature of Signing Officer/Director Detail

Date