

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000026583

Entity Name: A1A CITRUS NURSERY, INC.

FILED  
Jan 06, 2010  
Secretary of State

**Current Principal Place of Business:**

3254 B ROAD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

3254 B ROAD  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

FEI Number: 65-0745943      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

FROEHLICH, DAVID L SR.  
3254 B ROAD  
LOXAHATCHEE, FL 33470      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: D  
Name: FROEHLICH, DAVID L SR.  
Address: 3254 B ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D  
Name: FROEHLICH, LINDA B  
Address: 3254 B ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D  
Name: FROEHLICH, DAVID JR  
Address: 3120 B ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470

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: DAVID L FROEHLICH SR

PRES

01/06/2010

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

\_\_\_\_\_ Date