Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
COAST CITRUS DISTRIBUTORS INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/1993

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
COAST CITRUS DISTRIBUTORS, INC.

7597 BRISTOW COURT
SAN DIEGO, CA 92154

7597 BRISTOW COURT
SAN DIEGO, CA 92154

2b Employer Identification Number (EIN)
95-1628554

2c Sponsor's telephone number
619-661-7950

2d Business code (see instructions)
445110

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	02/07/2011	ISABEL FREELAND
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
COAST CITRUS DISTRIBUTORS, INC.

7597 BRISTOW COURT
SAN DIEGO, CA 92154

3b Administrator's EIN
95-1628554

3c Administrator's telephone number
619-661-7950

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:
a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	363
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	219
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	159
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	378
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	378
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	341
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	18
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2F 2G 2J 2K 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)		**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	X	**H** (Financial Information)
(2)		**I** (Financial Information – Small Plan)
(3)		**A** (Insurance Information)
(4)	X	**C** (Service Provider Information)
(5)	X	**D** (DFE/Participating Plan Information)
(6)		**G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A Name of plan
COAST CITRUS DISTRIBUTORS INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
COAST CITRUS DISTRIBUTORS, INC.

D Employer Identification Number (EIN)
95-1628554

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

FID.INV.INST.OPS.CO.

04-2647786

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
64 65 37 60	RECORDKEEPER	8010	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DREY MIDCAP VALUE A - DREYFUS TRANS 13-5673135	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a	Name: J. H. COHN, LLP	**b** EIN:	22-1478099
c	Position: ACCOUNTANT		
d	Address: 4180 RUFFIN ROAD, #235 SAN DIEGO, CA 92123	**e** Telephone:	858-535-2000

Explanation: NEEDED A FIRM WITH MORE EXPERTISE IN EMPLOYEE BENEFIT PLANS

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN;	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN;	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A Name of plan
COAST CITRUS DISTRIBUTORS INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
COAST CITRUS DISTRIBUTORS, INC.

D Employer Identification Number (EIN)
95-1628554

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: FA STABLE VALUE

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3022712-026	C	2947451

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A Name of plan
COAST CITRUS DISTRIBUTORS INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
COAST CITRUS DISTRIBUTORS, INC.

D Employer Identification Number (EIN)
95-1628554

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	501700	401954
(2) Participant contributions	1b(2)	9100	10362
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2575874	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	456434	471395
(9) Value of interest in common/collective trusts	1c(9)	0	2947451
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2187377	2793959
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	5730485	6625121
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	5730485	6625121

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	449414	
	(B) Participants	2a(1)(B)	256751	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		706165
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	282	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	22143	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		22425
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	42496	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		42496
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		68948
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		239768
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1079802
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	177330	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		177330
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		-174
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	8010	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		8010
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		185166
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		894636
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: PKF (2) EIN: 95-4354850

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. (2) [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A Name of plan
COAST CITRUS DISTRIBUTORS INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
COAST CITRUS DISTRIBUTORS, INC.

D Employer Identification Number (EIN)
95-1628554

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

Coast Citrus Distributors, Inc.
401(k) Profit Sharing Plan

Report on Financial Statements
(With Supplementary Information)

Year Ended June 30, 2010

PKF

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN

Index

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PKF
Certified Public Accountants
A Professional Corporation

PKF
Accountants &
business advisers

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator
Coast Citrus Distributors, Inc.
401(k) Profit Sharing Plan

We were engaged to audit the accompanying statement of net assets available for benefits of the Coast Citrus Distributors, Inc. 401(k) Profit Sharing Plan (the "Plan") as of June 30, 2010, and the related statement of changes in net assets available for benefits for the year ended June 30, 2010 and the supplemental Schedule H, line 4(i) - Schedule of Assets (Held at End of Year) as of June 30, 2010. These financial statements and supplemental schedule are the responsibility of the Plan's management. The financial statements of the Plan as of June 30, 2009 were audited by other auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Management Trust Company, the Trustee of the Plan. Their report, dated March 30, 2010, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements, other than that derived from the information certified by the Trustee, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 10, which was certified by Fidelity Management Trust Company, the Trustee of the Plan, except for comparing such information with the related information included in the 2010 financial statements and supplemental schedule. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the Trustee as of and for the year ended June 30, 2010, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Because of the significance of the information in the Plan's 2010 financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the 2010 financial statements and supplemental schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America, and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

PKF

San Diego, California
January 24, 2011

PKF
Certified Public Accountants
A Professional Corporation

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COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2010 and 2009

	2010	2009
Investments, at fair value:		
Mutual funds	$ 2,793,959	$ 2,187,377
Common/collective trust	2,947,451	-
Money market fund	-	2,575,874
Total investments	5,741,410	4,763,251
Receivables:		
Employer contributions	401,954	501,700
Participant contributions	10,362	9,100
Notes receivable from participants	471,395	456,434
Total receivables	883,711	967,234
Net assets available for benefits at fair value	6,625,121	5,730,485
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(54,992)	-
Net assets available for benefits	$ 6,570,129	$ 5,730,485

See Notes to Financial Statements.

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED JUNE 30, 2010

Additions:	
Investment income:	
Net appreciation in fair value of investments	$ 253,724
Interest and dividend income	42,778
Interest on participant notes receivable	22,143
Total investment income	318,645
Contributions:	
Participant contributions	256,751
Employer contributions	449,414
Total contributions	706,165
Total additions	1,024,810
Deductions:	
Distribution of benefits	(177,156)
Administrative expenses	(8,010)
Total deductions	(185,166)
Net increase in net assets available for benefits	839,644
Net assets available for benefits:	
Beginning of year	5,730,485
End of year	$ 6,570,129

See Notes to Financial Statements.

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of plan:

The following brief description of Coast Citrus Distributors, Inc. 401(k) Profit Sharing Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan is a defined contribution plan that covers substantially all non-union employees of Coast Citrus Distributors, Inc. (the "Employer" or "Company") who have completed six months of service. The Plan was originally established July 1, 1981 as a profit sharing plan and was amended and restated in its entirety, effective July 1, 1998, in order to qualify under the provisions of the Internal Revenue Code of 1986 (the "Code"), and any amendments thereto, and under any rulings or regulations adopted by the Department of Labor and/or the Department of Treasury. The Company serves as administrator of the Plan. The Plan engages Fidelity Management Trust Company (the "Trustee") (see Note 10) to hold and invest Plan assets and execute Plan transactions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Participation:

An employee may join the Plan on the first day of each Plan year and the first day of the fourth, seventh and twelfth months of each Plan year coinciding with or next following the date eligibility requirements are met.

Contributions:

The Plan is a savings plan that allows employees to defer a portion of their salaries for income tax purposes through contributions to the Plan and the investment of such contributions in the funds offered by the Plan. Participants may contribute between 2% and 15% of their compensation each year up to the maximum amount permitted under the Code.

The Company is required to make matching contributions to the Plan equal to 25% of each participant's annual deferred contribution, provided that the total of such matching contributions does not exceed 6% of the employees' annual compensation and Internal Revenue Service ("IRS") deferral limitations.

The Company may also make a discretionary profit sharing contribution each year. Discretionary contributions are allocated to a participant's account based on the ratio of the participants' salary to the total of the annual salaries of all non-union qualified employees. For participants to qualify for an allocation from discretionary contributions, they must be employed by the Company on the last day of the Plan year and have completed one year of service. A discretionary contribution of $400,000 is included in employer receivables for the year ended June 30, 2010. The discretionary contribution was funded to the Plan in December 2010.

A participant may, with the consent of the Plan administrator, make a rollover contribution to the Plan at any time. Rollover contributions are assets transferred to the Plan from a qualified savings plan in which an employee participated prior to employment with the Company.

The Plan provides that participants who are projected to be age 50 or older by the end of the calendar year and who are making contributions to the Plan may also make a catch-up contribution of up to $5,000.

Note 1 - Description of plan (concluded):

Participant accounts:

Each participant's account is credited or charged with the participant's contributions, the Company's matching contribution and an allocation of (a) the Company's discretionary profit sharing contribution (if any), (b) Plan earnings or losses, (c) forfeitures from terminated participants' nonvested accounts and (d) an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined.

The benefit to which a participant is entitled upon termination of service is equal to the vested benefit in the participant's account.

Participants' investment options:

Participants must direct their salary deferral contributions to selected investments as made available and determined by the Plan administrator. These investment options consist of mutual funds and a common/collective trust. Participants may change their investment options at any time throughout the year.

Vesting:

Participants are 100% vested in their voluntary contributions to the Plan plus actual earnings thereon at all times. All other contributions or credits to the participant's account vest at the rate of 20% per year of service.

Notes receivable from participants:

Participants may obtain loans from the Plan which are secured by the vested balance in the participant's account. The maximum amount that may be borrowed from the participant's vested account balance is the lesser of $50,000 or 50% of the vested account balance. These loans are pre-approved by the Company and the Trustee, except for loans to purchase a principal residence, and bear interest at prevailing market rates ranging from 4.25% to 9.50% as of June 30, 2010. Loan payments are made through payroll deductions over a period that may not exceed five years from the date the loan was made, unless the loan will be used to acquire a principal residence in which case the repayment period may not extend beyond ten years from the date of the loan.

Distributions:

Participants are entitled to a distribution of their vested benefits in the event of retirement, death, disability, termination of employment or termination of the Plan or any other reason. The distribution may be taken through one of the following methods: lump sum payment, monthly or annual installment annuities or life annuities. The method depends on marital status, as well as elections made by the participant. All methods of distribution have equivalent values.

At June 30, 2010 and 2009, net assets available for plan benefits included $0 and $120,677, respectively, for distributions to participants who have withdrawn from the Plan prior to the end of the Plan year.

Forfeitures:

At June 30, 2010 and 2009, forfeited nonvested accounts totaled $40,487 and $17,815, respectively. Forfeitures are retained in the Plan and will first be used to pay administrative expenses under the Plan, as directed by the Employer. Any remaining amounts will be used to reduce future Employer Contributions. In 2010 and 2009, administrative expenses in the amount of $3,885 and $12,335 were paid from forfeited nonvested accounts, respectively.

Note 2 - Summary of significant accounting policies:

Basis of presentation:

The accompanying financial statements have been prepared on the accrual basis of accounting.

Use of estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis. Refer to Note 5 for additional information related to the Plan's fully benefit-responsive investment contracts.

Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The Plan presents in the statement of changes in net assets available for benefits the net appreciation in the fair value of its investments which consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

Payment of benefits:

Benefits are recorded when paid.

New accounting pronouncements:

The Plan adopted the Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC"), which is now the single source of authoritative U.S. generally accepted accounting principles ("GAAP") recognized by the FASB. Rules and interpretive releases of the United States Securities and Exchange Commission (the "SEC") under authority of federal securities laws are also sources of authoritative U.S. GAAP for SEC registrants. All other accounting literature not included in the ASC or SEC rules and interpretive releases became nonauthoritative. As the ASC does not change U.S. GAAP, the adoption of the ASC had no impact on the Plan's financial statements.

Note 2 - Summary of significant accounting policies (concluded):

New accounting pronouncements (concluded):

In September 2010, the FASB released Accounting Standards Update ("ASU") 2010-25, *Reporting Loans to Participants by Defined Contribution Pension Plans* ("ASU 2010-25"). ASU 2010-25 clarifies how loans to participants should be classified and measured by defined contribution pension benefit plans. Participant loans were previously classified as investments at fair value in accordance with ASC 962-325-45-10. ASU 2010-25 requires that participant loans be classified as notes receivable from participants, which are segregated from plan investments and measured at their unpaid principal balance plus any accrued but unpaid interest. As permitted under ASU 2010-25, the Plan chose to early adopt ASU 2010-25 for reporting of its fiscal 2010 financial statements and retrospectively applied ASU 2010-25 for the Plan year ended June 30, 2009.

Subsequent events:

The Plan has evaluated events and transactions for potential recognition or disclosure through January 24, 2011, which is the date the financial statements were available to be issued.

Note 3 - Investments:

The following presents investments that represent 5% or more of the Plan's net assets at June 30, 2010 and 2009:

	2010		2009
Investments, at fair value:			
Fidelity Management:			
Advisor Stable Value Fund	$ 2,892,459	*	$ -
Advisor Short Fix Income T	859,505		757,329
Advisor Equity Income T	521,840		464,185
Treasury Fund	-		2,575,874

* Represents contract value

During the year ended June 30, 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in fair value by $253,754 as follows:

Mutual funds	$ 239,768
Common/collective trust	13,956
	$ 253,724

Note 4 - Fair value measurements:

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. Fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. In order to increase consistency and comparability in an orderly transaction between market participants at the measurement date. In order to increase consistency and comparability in fair value measurements, accounting rules for fair value measurements establish a fair value hierarchy that prioritizes observable and unobservable inputs used to measure fair value into three broad levels, which are described below:

Level 1: Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs.

Level 2: Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in inactive markets; or model-derived valuations in which all significant inputs are observable or can be derived principally from or corroborated with observable market data.

Level 3: Unobservable inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs.

In determining fair value, the Plan utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs to the extent possible as well as considers counterparty credit risk in its assessment of fair value. The following is a description of the valuation methodologies used for instruments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. There have been no changes in the valuation methodologies used for assets measured at fair value.

Money market funds:

Investments in money market funds are valued at amortized cost.

Mutual funds:

Investments in mutual funds are valued using market prices on active markets (Level 1). Level 1 instrument valuations are obtained from real-time quotes for transactions in active exchange markets involving identical assets.

Common/collective trust:

Investments in the common/collective trust are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer of the specific instruments of the fund at year end.

Note 4 - Fair value measurements (concluded):

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2010 and 2009:

	June 30, 2010	Level 1	Level 2	Level 3
Mutual funds	$ 2,793,959	$ 2,793,959	$ -	$ -
Common/collective trust	2,947,451	-	2,947,451	-
Totals	$ 5,741,410	$ 2,793,959	$ 2,947,451	$ -

	June 30, 2009	Level 1	Level 2	Level 3
Mutual funds	$ 2,187,377	$ 2,187,377	$ -	$ -
Money market fund	2,575,874	-	2,575,874	-
Totals	$ 4,763,251	$ 2,187,377	$ 2,575,874	$ -

Note 5 - Benefit-responsive investment contracts

The Plan's Fidelity Advisor Stable Value Fund ("Fund") is a common/collective trust fund comprised of Guaranteed Interest Contracts ("GICs"), synthetic GICs and short-term investments. These investments are recorded at fair market value in the statements of net assets available for benefits with an adjustment to reflect the investments at their contract value. All contracts are fully benefit-responsive and therefore carried at contract value. Contract value represents contributions to the Fund, plus accrued interest, less participant withdrawals. The fair values of the contracts are estimated to be $2,947,451 and $0 as of June 30, 2010 and 2009, respectively. This compares to contract values of $2,892,459 and $0 as of June 30, 2010 and 2009, respectively.

The interest rate credited to the participant's account is reset at least quarterly and in some cases may be reset more frequently. Inputs used to determine the crediting interest rate include each contract's portfolio market value, current yield to maturity, duration and market value relative to contract value. At June 30, 2010, the average yield earned by the Fund which was credited to unitholders was 1.37%. The average crediting interest rate was 2.47% at June 30, 2010.

Note 6 - Administrative expenses:

Substantially all costs associated with administering the Plan are paid by the Company.

Note 7 - Related party transactions:

Certain Plan investments are in shares of mutual funds that are managed by the Trustee. Therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for investment management services amounted to $12,854 and $13,101 for the year ended June 30, 2010 and 2009, respectively. All other transactions, which may be considered exempt parties-in-interest transactions, relate to normal Plan management and administrative services.

Note 8 - Income tax status:

The prototype-plan document, which the Plan has adopted via a nonstandardized adoption agreement, obtained its latest opinion letter in 2003 in which the Internal Revenue Service stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, management believes that the Plan currently is designed and being operated in compliance with the applicable requirements of the IRC and that, therefore, the Plan qualifies under Section 401(a) and the related trust is tax exempt as of June 30, 2010. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Note 9 - Plan termination:

The Company intends to continue the Plan indefinitely, but reserves the right to terminate it at any time. Upon termination of the Plan, all participants will become fully vested in their account balances under the Plan, subject to provisions of ERISA.

Note 10 - Information certified by the Trustee:

The following account balances and transactions were obtained from statements certified by the Trustee:

Statements of net assets available for benefits:
- Investments
- Notes receivable from participants

Statement of changes in net assets available for benefits:
- Investment income
- Contributions
- Deductions

Schedule of assets (held at end of year)

Note 11 - Risks and uncertainties:

The Plan invests in various mutual funds and a common/collective trust. Mutual funds and common/collective trusts are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain mutual funds and common/collective trusts, it is at least reasonably possible that changes in the values of mutual funds and common/collective trusts will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 12 - Reconciliation of the financial statements to Form 5500:

The following is a reconciliation of net assets available for benefits as presented in the financial statements to the Form 5500, as of June 30, 2010 and 2009:

	2010	2009
Net assets available for benefits per the financial statements	$ 6,570,129	$ 5,730,485
Adjustment from contract value to fair value for fully benefit responsive investment contracts	54,992	-
Net assets available for benefits per the Form 5500	$ 6,625,121	$ 5,730,485

Note 12 - Reconciliation of the financial statements to Form 5500 (concluded):

The following is a reconciliation of the change in net assets available for benefits as presented in the financial statements to the Form 5500 for the year ended June 30, 2010:

Change in net assets available for benefits per the financial statements	$	839,644
Change in adjustment from contract value to fair value for fully benefit responsive investment contracts		54,992
Change in net assets available for benefits per the Form 5500	$	894,636

Supplementary Information

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
IDENTIFYING NO. - 95-1628554
PLAN NO. - 002
SCHEDULE OF ASSETS (HELD AT END OF YEAR) (Schedule H, Line 4i)
JUNE 30, 2010

(a)	(b) Identity of issue, borrower lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current Value
	Mutual funds:		
	Dreyfus Midcap Value	Mutual Fund	$ 296,101
	Fidelity Management:		
*	Advisor High Income Adv T	Mutual Fund	94,808
*	Advisor Short Fix Income T	Mutual Fund	859,505
*	Advisor Growth & Income T	Mutual Fund	84,002
*	Advisor Equity Income T	Mutual Fund	521,840
*	Advisor Equity Growth T	Mutual Fund	144,678
*	Advisor Small Cap T	Mutual Fund	114,973
*	Advisor Dividend Growth T	Mutual Fund	232,467
*	Advisor Dynamic Capital Appreciation	Mutual Fund	5,387
*	Advisor Drivers International T	Mutual Fund	30,466
*	Advisor Freedom 2010 T	Mutual Fund	4,507
*	Advisor Freedom 2020 T	Mutual Fund	43,413
*	Advisor Freedom 2030 T	Mutual Fund	45,915
*	Advisor Freedom 2040 T	Mutual Fund	84,141
*	Advisor Freedom Income T	Mutual Fund	28
*	Advisor Freedom 2005 T	Mutual Fund	8,152
*	Advisor Freedom 2015 T	Mutual Fund	8,579
*	Advisor Freedom 2025 T	Mutual Fund	38,939
*	Advisor Freedom 2035 T	Mutual Fund	61,861
*	Advisor Freedom 2045 T	Mutual Fund	68,603
*	Advisor Freedom 2050 T	Mutual Fund	45,594
	Common/collective trust		
*	Fidelity Advisor Stable Value Fund	Common/Collective Trust	2,947,451
	Total		5,741,410
*	Participant loans	Interest rates ranging from 4.25% to 9.50%, various maturity dates through 2015	471,395
			$ 6,212,805

* Party-in-interest to the Plan.

Column (d), "cost" not required, participant directed.

See Independent Auditors' Report

Coast Citrus Distributors, Inc.
401(k) Profit Sharing Plan

Report on Financial Statements
(With Supplementary Information)

Year Ended June 30, 2010

PKF

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN

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PKF
Certified Public Accountants
A Professional Corporation

PKF
Accountants &
business advisers

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator
Coast Citrus Distributors, Inc.
401(k) Profit Sharing Plan

We were engaged to audit the accompanying statement of net assets available for benefits of the Coast Citrus Distributors, Inc. 401(k) Profit Sharing Plan (the "Plan") as of June 30, 2010, and the related statement of changes in net assets available for benefits for the year ended June 30, 2010 and the supplemental Schedule H, line 4(i) - Schedule of Assets (Held at End of Year) as of June 30, 2010. These financial statements and supplemental schedule are the responsibility of the Plan's management. The financial statements of the Plan as of June 30, 2009 were audited by other auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Management Trust Company, the Trustee of the Plan. Their report, dated March 30, 2010, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements, other than that derived from the information certified by the Trustee, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 10, which was certified by Fidelity Management Trust Company, the Trustee of the Plan, except for comparing such information with the related information included in the 2010 financial statements and supplemental schedule. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the Trustee as of and for the year ended June 30, 2010, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Because of the significance of the information in the Plan's 2010 financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the 2010 financial statements and supplemental schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America, and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

PKF

San Diego, California
January 24, 2011

PKF
Certified Public Accountants
A Professional Corporation

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COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2010 and 2009

	2010	2009
Investments, at fair value:		
Mutual funds	$ 2,793,959	$ 2,187,377
Common/collective trust	2,947,451	-
Money market fund	-	2,575,874
Total investments	5,741,410	4,763,251
Receivables:		
Employer contributions	401,954	501,700
Participant contributions	10,362	9,100
Notes receivable from participants	471,395	456,434
Total receivables	883,711	967,234
Net assets available for benefits at fair value	6,625,121	5,730,485
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(54,992)	-
Net assets available for benefits	$ 6,570,129	$ 5,730,485

See Notes to Financial Statements.

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED JUNE 30, 2010

Additions:	
Investment income:	
Net appreciation in fair value of investments	$ 253,724
Interest and dividend income	42,778
Interest on participant notes receivable	22,143
Total investment income	318,645
Contributions:	
Participant contributions	256,751
Employer contributions	449,414
Total contributions	706,165
Total additions	1,024,810
Deductions:	
Distribution of benefits	(177,156)
Administrative expenses	(8,010)
Total deductions	(185,166)
Net increase in net assets available for benefits	839,644
Net assets available for benefits:	
Beginning of year	5,730,485
End of year	$ 6,570,129

See Notes to Financial Statements.

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of plan:

The following brief description of Coast Citrus Distributors, Inc. 401(k) Profit Sharing Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan is a defined contribution plan that covers substantially all non-union employees of Coast Citrus Distributors, Inc. (the "Employer" or "Company") who have completed six months of service. The Plan was originally established July 1, 1981 as a profit sharing plan and was amended and restated in its entirety, effective July 1, 1998, in order to qualify under the provisions of the Internal Revenue Code of 1986 (the "Code"), and any amendments thereto, and under any rulings or regulations adopted by the Department of Labor and/or the Department of Treasury. The Company serves as administrator of the Plan. The Plan engages Fidelity Management Trust Company (the "Trustee") (see Note 10) to hold and invest Plan assets and execute Plan transactions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Participation:

An employee may join the Plan on the first day of each Plan year and the first day of the fourth, seventh and twelfth months of each Plan year coinciding with or next following the date eligibility requirements are met.

Contributions:

The Plan is a savings plan that allows employees to defer a portion of their salaries for income tax purposes through contributions to the Plan and the investment of such contributions in the funds offered by the Plan. Participants may contribute between 2% and 15% of their compensation each year up to the maximum amount permitted under the Code.

The Company is required to make matching contributions to the Plan equal to 25% of each participant's annual deferred contribution, provided that the total of such matching contributions does not exceed 6% of the employees' annual compensation and Internal Revenue Service ("IRS") deferral limitations.

The Company may also make a discretionary profit sharing contribution each year. Discretionary contributions are allocated to a participant's account based on the ratio of the participants' salary to the total of the annual salaries of all non-union qualified employees. For participants to qualify for an allocation from discretionary contributions, they must be employed by the Company on the last day of the Plan year and have completed one year of service. A discretionary contribution of $400,000 is included in employer receivables for the year ended June 30, 2010. The discretionary contribution was funded to the Plan in December 2010.

A participant may, with the consent of the Plan administrator, make a rollover contribution to the Plan at any time. Rollover contributions are assets transferred to the Plan from a qualified savings plan in which an employee participated prior to employment with the Company.

The Plan provides that participants who are projected to be age 50 or older by the end of the calendar year and who are making contributions to the Plan may also make a catch-up contribution of up to $5,000.

Note 1 - Description of plan (concluded):

Participant accounts:

Each participant's account is credited or charged with the participant's contributions, the Company's matching contribution and an allocation of (a) the Company's discretionary profit sharing contribution (if any), (b) Plan earnings or losses, (c) forfeitures from terminated participants' nonvested accounts and (d) an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined.

The benefit to which a participant is entitled upon termination of service is equal to the vested benefit in the participant's account.

Participants' investment options:

Participants must direct their salary deferral contributions to selected investments as made available and determined by the Plan administrator. These investment options consist of mutual funds and a common/collective trust. Participants may change their investment options at any time throughout the year.

Vesting:

Participants are 100% vested in their voluntary contributions to the Plan plus actual earnings thereon at all times. All other contributions or credits to the participant's account vest at the rate of 20% per year of service.

Notes receivable from participants:

Participants may obtain loans from the Plan which are secured by the vested balance in the participant's account. The maximum amount that may be borrowed from the participant's vested account balance is the lesser of $50,000 or 50% of the vested account balance. These loans are pre-approved by the Company and the Trustee, except for loans to purchase a principal residence, and bear interest at prevailing market rates ranging from 4.25% to 9.50% as of June 30, 2010. Loan payments are made through payroll deductions over a period that may not exceed five years from the date the loan was made, unless the loan will be used to acquire a principal residence in which case the repayment period may not extend beyond ten years from the date of the loan.

Distributions:

Participants are entitled to a distribution of their vested benefits in the event of retirement, death, disability, termination of employment or termination of the Plan or any other reason. The distribution may be taken through one of the following methods: lump sum payment, monthly or annual installment annuities or life annuities. The method depends on marital status, as well as elections made by the participant. All methods of distribution have equivalent values.

At June 30, 2010 and 2009, net assets available for plan benefits included $0 and $120,677, respectively, for distributions to participants who have withdrawn from the Plan prior to the end of the Plan year.

Forfeitures:

At June 30, 2010 and 2009, forfeited nonvested accounts totaled $40,487 and $17,815, respectively. Forfeitures are retained in the Plan and will first be used to pay administrative expenses under the Plan, as directed by the Employer. Any remaining amounts will be used to reduce future Employer Contributions. In 2010 and 2009, administrative expenses in the amount of $3,885 and $12,335 were paid from forfeited nonvested accounts, respectively.

Note 2 - Summary of significant accounting policies:

Basis of presentation:

The accompanying financial statements have been prepared on the accrual basis of accounting.

Use of estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis. Refer to Note 5 for additional information related to the Plan's fully benefit-responsive investment contracts.

Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The Plan presents in the statement of changes in net assets available for benefits the net appreciation in the fair value of its investments which consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

Payment of benefits:

Benefits are recorded when paid.

New accounting pronouncements:

The Plan adopted the Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC"), which is now the single source of authoritative U.S. generally accepted accounting principles ("GAAP") recognized by the FASB. Rules and interpretive releases of the United States Securities and Exchange Commission (the "SEC") under authority of federal securities laws are also sources of authoritative U.S. GAAP for SEC registrants. All other accounting literature not included in the ASC or SEC rules and interpretive releases became nonauthoritative. As the ASC does not change U.S. GAAP, the adoption of the ASC had no impact on the Plan's financial statements.

Note 2 - Summary of significant accounting policies (concluded):

New accounting pronouncements (concluded):

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Subsequent events:

The Plan has evaluated events and transactions for potential recognition or disclosure through January 24, 2011, which is the date the financial statements were available to be issued.

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Treasury Fund	-		2,575,874

* Represents contract value

During the year ended June 30, 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in fair value by $253,754 as follows:

Mutual funds	$ 239,768
Common/collective trust	13,956
	$ 253,724

Note 4 - Fair value measurements:

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. Fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. In order to increase consistency and comparability in an orderly transaction between market participants at the measurement date. In order to increase consistency and comparability in fair value measurements, accounting rules for fair value measurements establish a fair value hierarchy that prioritizes observable and unobservable inputs used to measure fair value into three broad levels, which are described below:

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Level 3: Unobservable inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs.

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Investments in the common/collective trust are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer of the specific instruments of the fund at year end.

Note 4 - Fair value measurements (concluded):

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2010 and 2009:

	June 30, 2010	Level 1	Level 2	Level 3
Mutual funds	$ 2,793,959	$ 2,793,959	$ -	$ -
Common/collective trust	2,947,451	-	2,947,451	-
Totals	$ 5,741,410	$ 2,793,959	$ 2,947,451	$ -

	June 30, 2009	Level 1	Level 2	Level 3
Mutual funds	$ 2,187,377	$ 2,187,377	$ -	$ -
Money market fund	2,575,874	-	2,575,874	-
Totals	$ 4,763,251	$ 2,187,377	$ 2,575,874	$ -

Note 5 - Benefit-responsive investment contracts

The Plan's Fidelity Advisor Stable Value Fund ("Fund") is a common/collective trust fund comprised of Guaranteed Interest Contracts ("GICs"), synthetic GICs and short-term investments. These investments are recorded at fair market value in the statements of net assets available for benefits with an adjustment to reflect the investments at their contract value. All contracts are fully benefit-responsive and therefore carried at contract value. Contract value represents contributions to the Fund, plus accrued interest, less participant withdrawals. The fair values of the contracts are estimated to be $2,947,451 and $0 as of June 30, 2010 and 2009, respectively. This compares to contract values of $2,892,459 and $0 as of June 30, 2010 and 2009, respectively.

The interest rate credited to the participant's account is reset at least quarterly and in some cases may be reset more frequently. Inputs used to determine the crediting interest rate include each contract's portfolio market value, current yield to maturity, duration and market value relative to contract value. At June 30, 2010, the average yield earned by the Fund which was credited to unitholders was 1.37%. The average crediting interest rate was 2.47% at June 30, 2010.

Note 6 - Administrative expenses:

Substantially all costs associated with administering the Plan are paid by the Company.

Note 7 - Related party transactions:

Certain Plan investments are in shares of mutual funds that are managed by the Trustee. Therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for investment management services amounted to $12,854 and $13,101 for the year ended June 30, 2010 and 2009, respectively. All other transactions, which may be considered exempt parties-in-interest transactions, relate to normal Plan management and administrative services.

Note 8 - Income tax status:

The prototype-plan document, which the Plan has adopted via a nonstandardized adoption agreement, obtained its latest opinion letter in 2003 in which the Internal Revenue Service stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, management believes that the Plan currently is designed and being operated in compliance with the applicable requirements of the IRC and that, therefore, the Plan qualifies under Section 401(a) and the related trust is tax exempt as of June 30, 2010. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Note 9 - Plan termination:

The Company intends to continue the Plan indefinitely, but reserves the right to terminate it at any time. Upon termination of the Plan, all participants will become fully vested in their account balances under the Plan, subject to provisions of ERISA.

Note 10 - Information certified by the Trustee:

The following account balances and transactions were obtained from statements certified by the Trustee:

Statements of net assets available for benefits:
- Investments
- Notes receivable from participants

Statement of changes in net assets available for benefits:
- Investment income
- Contributions
- Deductions

Schedule of assets (held at end of year)

Note 11 - Risks and uncertainties:

The Plan invests in various mutual funds and a common/collective trust. Mutual funds and common/collective trusts are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain mutual funds and common/collective trusts, it is at least reasonably possible that changes in the values of mutual funds and common/collective trusts will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 12 - Reconciliation of the financial statements to Form 5500:

The following is a reconciliation of net assets available for benefits as presented in the financial statements to the Form 5500, as of June 30, 2010 and 2009:

	2010	2009
Net assets available for benefits per the financial statements	$ 6,570,129	$ 5,730,485
Adjustment from contract value to fair value for fully benefit responsive investment contracts	54,992	-
Net assets available for benefits per the Form 5500	$ 6,625,121	$ 5,730,485

Note 12 - Reconciliation of the financial statements to Form 5500 (concluded):

The following is a reconciliation of the change in net assets available for benefits as presented in the financial statements to the Form 5500 for the year ended June 30, 2010:

Change in net assets available for benefits per the financial statements	$	839,644
Change in adjustment from contract value to fair value for fully benefit responsive investment contracts		54,992
Change in net assets available for benefits per the Form 5500	$	894,636

Supplementary Information

COAST CITRUS DISTRIBUTORS, INC.
401(k) PROFIT SHARING PLAN
IDENTIFYING NO. - 95-1628554
PLAN NO. - 002
SCHEDULE OF ASSETS (HELD AT END OF YEAR) (Schedule H, Line 4i)
JUNE 30, 2010

(a)	(b) Identity of issue, borrower lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current Value
	Mutual funds:		
	Dreyfus Midcap Value	Mutual Fund	$ 296,101
	Fidelity Management:		
*	Advisor High Income Adv T	Mutual Fund	94,808
*	Advisor Short Fix Income T	Mutual Fund	859,505
*	Advisor Growth & Income T	Mutual Fund	84,002
*	Advisor Equity Income T	Mutual Fund	521,840
*	Advisor Equity Growth T	Mutual Fund	144,678
*	Advisor Small Cap T	Mutual Fund	114,973
*	Advisor Dividend Growth T	Mutual Fund	232,467
*	Advisor Dynamic Capital Appreciation	Mutual Fund	5,387
*	Advisor Drivers International T	Mutual Fund	30,466
*	Advisor Freedom 2010 T	Mutual Fund	4,507
*	Advisor Freedom 2020 T	Mutual Fund	43,413
*	Advisor Freedom 2030 T	Mutual Fund	45,915
*	Advisor Freedom 2040 T	Mutual Fund	84,141
*	Advisor Freedom Income T	Mutual Fund	28
*	Advisor Freedom 2005 T	Mutual Fund	8,152
*	Advisor Freedom 2015 T	Mutual Fund	8,579
*	Advisor Freedom 2025 T	Mutual Fund	38,939
*	Advisor Freedom 2035 T	Mutual Fund	61,861
*	Advisor Freedom 2045 T	Mutual Fund	68,603
*	Advisor Freedom 2050 T	Mutual Fund	45,594
	Common/collective trust		
*	Fidelity Advisor Stable Value Fund	Common/Collective Trust	2,947,451
	Total		5,741,410
*	Participant loans	Interest rates ranging from 4.25% to 9.50%, various maturity dates through 2015	471,395
			$ 6,212,805

* Party-in-interest to the Plan.

Column (d), "cost" not required, participant directed.

See Independent Auditors' Report

Form **5558**
(Rev. January 2008)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File Certain Employee Plan Returns

► **For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 3.**

OMB No. 1545-0212

File With IRS Only

Part I Identification

A Name of filer, plan administrator, or plan sponsor (see instructions)

Number, street, and room or suite no. (If a P.O. box, see instructions)

City or town, state, and ZIP code

B **Filer's identifying number (see instructions).**

☐ Employer identification number (EIN).

☐ Social security number (SSN)

C Plan name	Plan number	Plan year ending— MM	DD	YYYY
1				
2				
3				

Part II Extension of Time to File Form 5500 or Form 5500-EZ *(see instructions)*

1 I request an extension of time until ____/____/____ to file Form 5500 or Form 5500-EZ.

The application **is automatically approved** to the date shown on line 1 (above) if: **(a)** the Form 5558 is filed on or before the normal due date of Form 5500 or 5500-EZ for which this extension is requested, and **(b)** the date on line 1 is no more than 2½ months after the normal due date.

You must attach a copy of this Form 5558 to each Form 5500 and 5500-EZ filed after the due date for the plans listed in C above.

Note. A signature is not required if you are requesting an extension to file Form 5500 or Form 5500-EZ.

Part III Extension of Time to File Form 5330 *(see instructions)*

2 I request an extension of time until ____/____/____ to file Form 5330.
You may be approved for up to a six (6) month extension to file Form 5330, after the normal due date of Form 5330.

a Enter the Code section(s) imposing the tax . . . . . ► **a**

b Enter the payment amount attached . . . . . ► **b**

c For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date . . . ► **c**

3 **State in detail why you need the extension**

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Signature ► **Date** ►