FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)								
1. Name and Address of Report Person - ALICO INC	Requ (Mon	te of Event iring Stater th/Day/Yea		3. Issuer Name and Ticker or Trading Symbol ALICO INC [ALCO]				
(Last) (First) (Mic 640 SOUTH MAIN STREE O BOX 338	aale)	2/2002		Person(s) to (Check	all applicable	e)	Original Filed(Month/Day/Year)	
(Street) LA BELLE, FL 33935				X Director Officer (s title below)			Filing(Che _X_ Form f Person	lual or Joint/Group eck Applicable Line) iled by One Reporting iled by More than One Person
(City) (State) (Z	Zip)	Table	I - N	on-Derivativ	e Securitie	s Be	neficial	ly Owned
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock - Alico, Inc. (ALCO)			500		D			
	ho respond t	o the colle	ction	ities beneficially of information splays a currei	contained in	this fo	orm are n	
Table II - Derivative Sec	urities Benef	ficially Owr	ned (<i>e</i>	e.g., puts, calls,	warrants, o	otions	, convert	ible securities)
1. Title of Derivative Security (Instr. 4)	2. Date Exe	e Exercisable xpiration Date		tle and Amount urities Underlyir vative Security r. 4)	of 4. g Conversion or Exercise Price of	5. on Ow se Fo De	5. n Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivativ Security	Dir or (I)	ecurity: rect (D) Indirect str. 5)	
D '' 0								

Reporting Owners

Paparting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ALICO INC 640 SOUTH MAIN STREET P O BOX 338 LA BELLE, FL 33935	Х					

Signatures

Amy Gravina	10/20/2003		
Signature of Reporting Person	Date		

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.