FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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 Reporting Person - 2. Date of E Requiring S		uiring Stat	tatement ALICC		uer Name and Ticker or Trading Symbol CO INC [alco]				
Koesters Jerry (Month/Day,			ai)						
(Last) (First) (Middle) 12/01/2		1/2006		Person(s) to		Original	endment, Date Filed(Month/Day/Year)		
(Street) LEHIGH ACRES, FL 3397	71			DirectorX_ Officer (stille below)		Filing(Ch Dw) X_ Form Person Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Z	Zip)	Tabl	e I - N	on-Derivativ	e Securitie	s Beneficia	lly Owned		
1.Title of Security (Instr. 4)		В		t of Securities Ily Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of In Ownership (Instr. 5)	direct Beneficial		
Alico, Inc., Common Stock \$1.00	k, Par Valu	e 0			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) 2. Dat and E		e Exercisable xpiration Date Day/Year)		tle and Amount urities Underlyin vative Security r. 4)	of 4.	5. on Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivativ Security	Security: Direct (D) or Indirect (I) (Instr. 5)			

Reporting Owners

Banasting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Koesters Jerry 4741 VARSITY CIRCLE LEHIGH ACRES, FL 33971			Director of Accounting		

Signatures

Jerry Koesters	12/01/2006
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.