FORM 3

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

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 Repo Person -	Requ	te of Event iiring State	ment		3. Issuer Name and Ticker or Trading Symbol ALICO INC [alco]				
Rockers Dwight	,	th/Day/Yea	ar)						
P.O. BOX 243	12/0	1/2006		Person(s) to				ndment, Date Filed(Month/Day/Year)	
(Street)				Director	(Check all applicable) Director X Officer (give Other title below) VP Sugarcane Sod Vegetable			Filing(Check Applicable Line) _X_ Form filed by One Reporting	
FELDA, FL 33930									
(City) (State) (Z	Zip)	Table	I - N	on-Derivativ	e Securitie	s Be	neficial	ly Owned	
1.Title of Security (Instr. 4)		Ber		nt of Securities Illy Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	rship	lirect Beneficial	
Alico, Inc., Common Stock \$1.00	k, Par Value	9 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	2. Date Exe			tle and Amount		5.	,	6. Nature of Indirect	
(Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		on Date	Secu	urities Underlyir vative Security	or Exerci Price of	on Ov se Fo De	rm of erivative	p Beneficial Ownership	
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivativ Security	Dir or (l)	Security: Direct (D) or Indirect (I) (Instr. 5)		

Reporting Owners

Banasting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director 10% Owner Officer		Officer	Other			
Rockers Dwight P.O. BOX 243 FELDA, FL 33930			VP Sugarcane Sod Vegetable				

Signatures

Dwight Rockers	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.