

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 02, 2000 8:00 am**  
**Secretary of State**

02-02-2000 90029 007 \*\*\*\*61.25

**DOCUMENT # 721736**

1. Entity Name

**REALTORS ASSOCIATION OF CITRUS COUNTY, INC.**

**A0015944**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**1619 W. GULF TO LAKE HWY  
 LECANTO FL 32661**

**1619 W. GULF TO LAKE HWY  
 LECANTO FL 34461-7725**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1743091**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STANTON, ERNA  
 1619 W. GULF TO LAKE HWY  
 LECANTO FL 32661**

Name

Street Address (P.O.-Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CRIDLAND, LINDA 425 CROFT AVE INVERNESS FL 34452</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D STOCKER, JANICE 155 DOUGLAS ST STE B HOMOSASSA FL 34446</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D VARNADOE, STEVE 730 N SUNCOAST BLVD CRYSTAL RIVER FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MOORE, ELAINE 11905 RIVERHAVEN DR HOMOSASSA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S STANTON, ERNA 1619 W GULF TO LAKE HWY LECANTO FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SNELL, FREDERICK 6210 W. CORPORATE OAKS DR. CRYSTAL RIVER FL 34429</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P CRIDLAND, LINDA 2717 Hwy. 44 WEST INVERNESS, FL 34453</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD KRAMER, HOLLIE 4177 S. SUNCOAST BLVD. HOMOSASSA, FL 34446</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HOLLOWAY, JOHN 1100 WEST MAIN ST. INVERNESS, FL 34450</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T BARNES, JOHN 4155 S. SUNCOAST BLVD. HOMOSASSA, FL 34446</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SNELL, FREDERICK 6210 W. CORPORATE OAKS DR. CRYSTAL RIVER, FL 34429</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
 Signature and typed or printed name of signing officer or director

**Erna Stanton, Corporate Secretary**

**1/28/2000**

Date

Daytime Phone #

CR2E037 (9/99)