

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 724212 (6)  
1. Corporation Name

THE CITRA IMPROVEMENT SOCIETY AND VOLUNTEER FIRE ARTMENT, INC



Principal Place of Business: 2189 NE 180TH LANE, P.O. BOX 236, CITRA FL 32113  
Mailing Address: 2189 NE 180TH LANE, P.O. BOX 236, CITRA FL 32113

3. Date Incorporated or Qualified: 08/28/1972  
3a. Date of Last Report: 02/16/1995  
4. FEI Number: 59-1802491  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
22. Suite, Apt. #, etc.: 27  
23. City & State: 28  
24. Zip: 25 Country: 29 Zip: 30 Country: 30

9. Name and Address of Current Registered Agent: CROSBY, W. J., 2 ML E CITRA SR 318, CITRA FL 32113  
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	BAGLEY, EDWARD L 1 BK OF US 301 CITRA, FL 00000	1.1 TITLE: D	ROB MOSLEY 3BKS W OF US 301 CITRA . FL
TITLE: PD	MCGEE, JOHN S (CHMN) 1 1/2 ML W CITRA SR 318 CITRA, FL 00000	1.2 NAME:	
TITLE: D	PERRY, C W 1 BK E OF US 301 CITRA, FL 00000	1.3 STREET ADDRESS:	
TITLE: D	PERRY, REX O. 2 BKS E OF US 301 CITRA FL	1.4 CITY-ST-ZIP:	
TITLE: STD	CROSBY, W. J. 2 ML E CITRA SR 318 CITRA FL	2.1 TITLE:	
TITLE: D	PERRY, MRS. REX O. 2 BK E OF US 301 CITRA FL	2.2 NAME:	
		2.3 STREET ADDRESS:	
		2.4 CITY-ST-ZIP:	
		3.1 TITLE:	
		3.2 NAME:	
		3.3 STREET ADDRESS:	
		3.4 CITY-ST-ZIP:	
		4.1 TITLE:	
		4.2 NAME:	
		4.3 STREET ADDRESS:	
		4.4 CITY-ST-ZIP:	
		5.1 TITLE:	
		5.2 NAME:	
		5.3 STREET ADDRESS:	
		5.4 CITY-ST-ZIP:	
		6.1 TITLE:	
		6.2 NAME:	
		6.3 STREET ADDRESS:	
		6.4 CITY-ST-ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on a attachment with an address.

SIGNATURE: W. J. Crosby W.J. CROSBY DATE: MAY 29 1996 / 352-595-3871 Daytime Phone #

CR2E037 (12/95)