

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746849

FILED
Jul 05, 2004
Secretary of State

Entity Name: CITRUS COUNTY BUILDERS ASSOCIATION, INC.

Current Principal Place of Business:

1196 S. LECANTO HWY.
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

1196 S. LECANTO HWY.
LECANTO, FL 34461

New Mailing Address:

FEI Number: 59-1896946 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DUMAS, BETH
1196 S. LECANTO HWY.
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: JENKINS, DENNIS
Address: 7119 W GULF TO LAKE HWY
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: TD () Delete
Name: HALL, GASTON
Address: 4775 N LECANTO HWY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S () Delete
Name: GALBRAITH, DAN
Address: P.O. BOX 5299
City-St-Zip: SPRING HILL, FL 34606

Title: D () Delete
Name: LIEBERMAN, RONALD
Address: 547 SE FORT ISLAND TRAIL, SUITE I
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: PD () Delete
Name: CONARD, GREG
Address: 1590 N MEADOWCREST BLVD.
City-St-Zip: INVERNESS, FL 34452

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: BELL, JOE
Address: 2410 HWY 44 WEST
City-St-Zip: INVERNESS, FL 34452

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WHEELER, PEGGY
Address: P O BOX 310
City-St-Zip: INVERNESS, FL 34451

Title: D (X) Change () Addition
Name: GALBRAITH, DAN
Address: P O BOX 640340
City-St-Zip: BEVERLY HILLS, FL 34464

Title: PD (X) Change () Addition
Name: LIEBERMAN, RONALD
Address: P O BOX 781
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D () Change (X) Addition
Name: MOBERLEY, MICHAEL
Address: 1731 SUNCOAST BLVD
City-St-Zip: HOMOSASSA, FL 34448

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD LIEBERMAN

PD

07/05/2004

Electronic Signature of Signing Officer or Director

_____ Date