


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90040 026 ****70.00

DOCUMENT # 747989

1. Entity Name
CITRUS WOODS PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
1610 REYNOLDS ROAD, LOT #391
LAKELAND FL 33801

Mailing Address
1610 REYNOLDS ROAD, LOT #391
LAKELAND FL 33801



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

1st MOORE CR2E037 (10/05)

4. FEI Number **59-1964760** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CLARK CAMPBELL & MAWHINNEY, PA
500 S FLORIDA AVE
SUITE 800
LAKELAND FL 33802

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JONES, DONALD DONALD 1610 REYNOLDS ROAD, # 232 LAKELAND FL 33801	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JAMES, BRAD 1610 REYNOLDS ROAD, # 226 LAKELAND FL 33801	<input type="checkbox"/> Delete	D Faye Riggs 1610 Reynolds Rd #90 Lakeland FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUSH, VERA 1610 REYNOLDS ROAD # 1 LAKELAND FL 33801	<input type="checkbox"/> Delete	D Tafil, Carol 1610 Reynolds Rd #376 Lakeland FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAHONEY, LUZETTA 1610 REYNOLDS ROAD, # 10 LAKELAND FL 33801	<input checked="" type="checkbox"/> Delete	D Iwanicki, Eileen 1610 Reynolds Rd #17 Lakeland FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAMANEN, JEAN 1610 REYNOLDS RD #118 LAKELAND FL 33801	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDELSON, SUE 1610 REYNOLDS RD #104 LAKELAND FL 33801	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Jean Lamanen* **JEAN LAMANEN** 4/3/06 863-669-9771