2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 08:00 AM
Secretary of State

DOCUMENT # L04375

1. Entity Name
SWEETWATER HOMES OF CITRUS, INC.

Principal Place of Business	Mailing Address
8016 S SUNCOAST BLVD HOMOSASSA, FL 32646	8016 S SUNCOAST BLVD HOMOSASSA, FL 32646

DO NOT WRITE IN THIS SPACE

01152004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2957488
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CHRISTENSEN, ROBERT R.
60 CYPRESS BLVD WEST
HOMOSASSA, FL 34446

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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 $150.00
After May 1, 2004 Fee will be $550.00

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

U00000064871
02/25/04-80012-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	PONTICOS, STEPHAN E
STREET ADDRESS	7 W BYRSONIMA CT
CITY-ST-ZIP	HOMOSASSA, FL 34446
TITLE	P
NAME	TATE, LARRY
STREET ADDRESS	11 BYRSONIMA CT WEST
CITY-ST-ZIP	HOMOSASSA, FL
TITLE	VP
NAME	BRUNSINK, WAYNE
STREET ADDRESS	14 CHINKAPIN CIRCLE
CITY-ST-ZIP	HOMOSASSA, FL
TITLE	T
NAME	CHRISTENSEN, ROBERT
STREET ADDRESS	60 CYPRESS BLVD., WEST
CITY-ST-ZIP	HOMOSASSA, FL
TITLE	S
NAME	MAUGHAN, NELSON
STREET ADDRESS	44 CYPRESS BLVD WEST
CITY-ST-ZIP	HOMOSASSA, FL 34446
TITLE	VP
NAME	JACOBY, JAMES JAY
STREET ADDRESS	41 OAK VILLAGE BOULEVARD
CITY-ST-ZIP	HOMOSASSA, FL 34446

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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 607, 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: _____ 2-20-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #