

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005508

FILED  
Apr 07, 2011  
Secretary of State

**Entity Name:** CITRUS OAKS LANDINGS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1288 MELONTREE CT  
GOTHA, FL 34734

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 314  
GOTHA, FL 34734

**New Mailing Address:**

882 JACKSON AVENUE  
WINTER PARK, FL 32789

**FEI Number:** 59-3759054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MALCOM, THOMAS  
882 JACKSON AVENUE  
WINTER PARK, FL 32789 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: P  
Name: HERRERA, OSWALDO  
Address: 1246 MELONTREE CT  
City-St-Zip: GOTHA, FL 34734

Title: VP  
Name: EVELAND, WILLIAM  
Address: 1270 MELONTREE CT  
City-St-Zip: GOTHA, FL 34734

Title: D  
Name: COHEN, GEORGIANNA  
Address: 1277 MELONTREE CT  
City-St-Zip: GOTHA, FL 34734

Title: T  
Name: LEWIS, DANA M  
Address: 1288 MELONTREE CT  
City-St-Zip: GOTHA, FL 34734

Title: D  
Name: BLASKO, JOSEPH  
Address: 1276 MELONTREE CT  
City-St-Zip: GOTHA, FL 34734

I hereby 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 all other like empowered.

SIGNATURE: THOMAS MALCOM

AGEN

04/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date