

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90189 017 ****61.25

DOCUMENT # N03988

1. Entity Name

**GREENBRIAR OF CITRUS HILLS OWNERS'
ASSOCIATION, INC.**



Principal Place of Business

**2450 N CITRUS HILLS BLVD.
HERNANDO FL 34442
US**

Mailing Address

**2450 N CITRUS HILLS BLVD.
HERNANDO FL 34442
US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2501605

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TRINGALI, MICHAEL J
JOSEPH & COMPANY CPA'S, INC.
2450 N CITRUS HILLS BLVD.
HERNANDO FL 34442**

7. Name and Address of New Registered Agent

Name

HUGH E. PHILLIPS

Street Address (P.O. Box Number is Not Acceptable)

1339 N CARNEVALE TEAR

City

LECANTO

FL

Zip Code

34461

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 **Hugh E Phillips**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/28/07

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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

TITLE SD ☒ Delete
NAME RIGNEY, MARY ANN
STREET ADDRESS 65 E HARTFORD ST
CITY-ST-ZIP HERNANDO FL 34442

TITLE D ☐ Delete
NAME DIFRISCO, VICTOR
STREET ADDRESS 370 E GLASSBORO CT
CITY-ST-ZIP HERNANDO FL 34442

TITLE PD ☐ Delete
NAME SWANSON, PATRICIA
STREET ADDRESS 261 E. HARTFORD ST.
CITY-ST-ZIP HERNANDO FL

TITLE VPD ☐ Delete
NAME DEYESO, NANCY
STREET ADDRESS 270 E GLASSBORO 3B
CITY-ST-ZIP HERNANDO FL

TITLE TD ☒ Delete
NAME NEERING, BOB
STREET ADDRESS 5586 LINKSVIEW WAY
CITY-ST-ZIP GLADWIN MI 48624

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME PATRICIA WILKENS
STREET ADDRESS 115 E. HARTFORD ST
CITY-ST-ZIP HERNANDO, FL 34442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME JACK KENNY
STREET ADDRESS 1442 E RIDGEFIELD DR
CITY-ST-ZIP HERNANDO, FL 34442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Patricia A. Swanson, Pres.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/07 352.746.7944

Date

Daytime Phone #