

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90025 027 ****61.25

DOCUMENT # N19863

1. Entity Name

CITRUS MEMORIAL HEALTH FOUNDATION, INC.



Principal Place of Business

**% CHARLES A. BLASBAND
502 HIGHLAND BLVD.
INVERNESS FL 34452-4754
US**

Mailing Address

**% CHARLES A. BLASBAND
502 HIGHLAND BLVD.
INVERNESS FL 34452-4754
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2890430**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**BLASBAND, CHARLES A.
502 HIGHLAND BLVD.
INVERNESS FL 34452**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	BLASBAND, CHARLES A.	502 HIGHLAND BLVD.	INVERNESS FL				
D	HENIGAR, ROBERT L	640 E. STATE RD, 44	CRYSTAL RIVER FL			502 HIGHLAND BLVD	
D	BRANNEN, JOE S	320 HIGHWAY 41 SOUTH	INVERNESS FL			502 HIGH AND BLVD	
D	JORDAN, MARILYN	502 HIGHLAND BLVD.	INVERNESS FL				
DST	ALCORN, STEPHEN W.	609 W. HIGHLAND BLVD.	INVERNESS FL	D		502 HIGHLAND BLVD	
D	KOFMEHL, PHILLIP C	502 HIGHLAND BLVD.	INVERNESS FL				

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with similar like empowered.

SIGNATURE: CHARLES A. BLASBAND REQUIRED

JANUARY 22, 2003

352-726-1551 x6583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)

ATTACHMENT
N19863
30027874

ATTACHMENT TO 2003 CORPORATION ANNUAL REPORT
CITRUS MEMORIAL HEALTH FOUNDATION, INC.
FEI NUMBER 59-2890430

BOX 11

OFFICERS AND DIRECTORS CHANGES

7.1 D
7.2 Langer, David
7.3 502 Highland Blvd.
7.4 Inverness, FL 34452

8.1 D
8.2 Sanders, James T.
8.3 502 Highland Blvd.
8.4 Inverness, FL 34452

9.1 DC	D	Change
9.2 Langley, Alida		
9.3 502 Highland Blvd.		
9.4 Inverness, FL 34452		

10.1 D	DST	Change
10.2 Frankel, Deborah		
10.3 502 Highland Blvd.		
10.4 Inverness, FL 34452		

11.1 DV	DC	Change
11.2 Chadwick, Sandra		
11.3 502 Highland Blvd.		
11.4 Inverness, FL 34452		

12.1 D	DV	Change
12.2 Fredrick, Debra		
12.3 502 Highland Blvd.		
12.4 Inverness, FL 34452		

13.1 D
13.2 Stringer, Thomas
13.3 502 Highland Blvd.
13.4 Inverness, FL 34452