

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014565

FILED
Mar 02, 2004
Secretary of State

Entity Name: CITRUS CONSTRUCTION SERVICES, INC.

Current Principal Place of Business:

319 CLEMATIS ST., STE. 901
WEST PALM BEACH, FL 33401

New Principal Place of Business:

THE BRANDYWINE CENTRE I
580 VILLAGE BLVD., SUITE 120
WEST PALM BEACH, FL 33409

Current Mailing Address:

319 CLEMATIS ST., STE. 901
WEST PALM BEACH, FL 33401

New Mailing Address:

BRANDYWINE CENTRE I
580 VILLAGE BLVD., SUITE 120
WEST PALM BEACH, FL 33409

FEI Number: 65-1081039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLIFFORD I. HERTZ, P.A.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RICHMAN, RICHARD P
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

Title: P () Delete
Name: MILLER, KRISTIN
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

Title: V () Delete
Name: SALZMAN, DAVID
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

Title: S () Delete
Name: DODGE, GINA
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

Title: T () Delete
Name: LUDEKE, NEAL
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

Title: AT () Delete
Name: KRANFNICK, CHARLES
Address: 599 W. PUTNAM AVE.
City-St-Zip: GREENWICH, CT 06830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTIN M. MILLER

P

03/02/2004

Electronic Signature of Signing Officer or Director

_____ Date