

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762601

FILED
Apr 22, 2009
Secretary of State

Entity Name: CITRUS HILLS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2541 N RESTON TERR
HERNANDO, FL 34442 US

New Principal Place of Business:

Current Mailing Address:

2541 N RESTON TERR
HERNANDO, FL 34442 US

New Mailing Address:

FEI Number: 59-2480706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABANA & CO, INC.
2541 N RESTON TERR
HERNANDO, FL 34442 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: V () Delete
Name: THOMAS, PAUL
Address: 2828 N CLEMENTS AVE
City-St-Zip: HERNANDO, FL 34442

Title: D () Delete
Name: BASIL, UCCI
Address: 4067 LECANTO HWY
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S () Delete
Name: JONES, GERRY
Address: 172 E DAKOTA CT
City-St-Zip: HERNANDO, FL 34442

Title: PD () Delete
Name: HOLLINGSWORTH, RUSS
Address: 165 W LIBERTY ST
City-St-Zip: HERNANDO, FL 34442

Title: T () Delete
Name: NEBRASKA, BILL
Address: 250 E IRELAND CT
City-St-Zip: HERNANDO, FL 34442

Title: D () Delete
Name: WYNNE, CLINT
Address: 698 E CHARLESTON CT
City-St-Zip: HERNANDO, FL 34442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMAS, PAUL
Address: 2828 N CLEMENTS AVE
City-St-Zip: HERNANDO, FL 34442

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

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

Title: T (X) Change () Addition
Name: HALLORAN, DIANE
Address: 637 E IRELAND CT
City-St-Zip: HERNANDO, FL 34442

Title: VP (X) Change () Addition
Name: HOLLAND, HELEN
Address: 61 FALCONRY CT
City-St-Zip: HERNANDO, FL 34442

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL THOMAS

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date