

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05629

FILED
Apr 07, 2011
Secretary of State

Entity Name: THE CITRUS OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

SPECIALTY MANAGEMENT CO OF CENTRAL FLORIDA
882 JACKSON AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

SPECIALTY MANAGEMENT CO OF CENTRAL FLORIDA
882 JACKSON AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-2336316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALCOM, THOMAS D
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: PD
Name: WIRICK, EDITH
Address: 9466 LAKE LOTTA CIRCLE
City-St-Zip: GOTH, FL 32734

Title: SD
Name: KENT, ELAINE
Address: 9463 COMEAU ST.
City-St-Zip: GOTH, FL 32734

Title: VPD
Name: CAUDILL, CLAUDIA
Address: 9458 LAKE LOTTA CIR.
City-St-Zip: GOTH, FL 32734

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