

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710236

Entity Name: CITRUS COUNTY ASSOCIATION FOR RETARDED CITIZENS, INC.**FILED**
Mar 26, 2018
Secretary of State
CC6540191796**Current Principal Place of Business:**5399 W GULF TO LAKE HWY
LECANTO, FL 34461**Current Mailing Address:**5399 W GULF TO LAKE HWY
LECANTO, FL 34461**FEI Number: 59-1154716****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WALKER, MELISSA L
5399 W GULF TO LAKE HWY
LECANTO, FL 34461 US*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:** MELISSA WALKER**03/26/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	RECORDING SECRETARY
Name	DETMER, E. DAVID MR.	Name	LEVINS, RUTH LMS.
Address	85 S. MAYLEN AVENUE	Address	3930 N. SEMINOLE PT.
City-State-Zip:	LECANTO FL 34461	City-State-Zip:	CRYSTAL RIVER FL 34428
Title	TREASURER	Title	VP
Name	VICK, DENNIS	Name	ZEMANIK, CAROLYN
Address	5570 E. TENISON STREET	Address	2575 N. LANTERN TERRACE
City-State-Zip:	INVERNESS FL 34452	City-State-Zip:	HERNANDO FL 34442
Title	CORRESPONDING SECRETARY		
Name	MORTON, JAMES		
Address	1645 W MAIN ST		
City-State-Zip:	INVERNESS FL 34450		

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: MELISSA WALKER**EXECUTIVE DIRECTOR****03/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date