2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710236

Entity Name: CITRUS COUNTY ASSOCIATION FOR RETARDED CITIZENS,

Apr 20, 2021 Secretary of State 7301837424CC

FILED

INC.

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 04/20/2021

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title RECORDING SECRETARY Title **TREASURER** Name LEVINS, RUTH LMS. Name VICK, DENNIS

Address 3930 N. SEMINOLE PT. Address 5570 E. TENISON STREET City-State-Zip: CRYSTAL RIVER FL 34428 City-State-Zip: INVERNESS FL 34452

PRESIDENT Title CORRESPONDING SECRETARY Title

Name ZEMANIK, CAROLYN Name MORTON, JAMES Address 2575 N. LANTERN TERRACE Address 1645 W MAIN ST

City-State-Zip: INVERNESS FL 34450 City-State-Zip: HERNANDO FL 34442

Title **DIRECTOR** Title **CFO**

Name WALKER, MELISSA Name DOUCETTE, LEO

Address 5399 W GULF TO LAKE HWY 3822 WASHBURN PLACE Address

City-State-Zip: LECANTO FL 34461 WESLEY CHAPEL FL 33543 City-State-Zip:

VΡ Title

Name MOLING, CHRIS Address **PO BOX 177**

INVERNESS FL 34451 City-State-Zip:

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: LEO DOUCETTE

CFO

04/20/2021