

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720657

**Entity Name:** CITRUS COUNTY AUDUBON SOCIETY, INC.**Current Principal Place of Business:**19065 SW 92ND LOOP  
C/O FRED HILEMAN  
DUNNELLON, FL 34431**Current Mailing Address:**P.O. BOX 527  
LECANTO, FL 34460-0527 US**FEI Number:** 23-7160727**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILEMAN, FRED  
19065 SW 92ND LOOP  
DUNNELLON, FL 34431 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:** FRED HILEMAN**03/25/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	HILEMAN, FRED
Address	19065 SW 92ND LOOP
City-State-Zip:	DUNNELLON FL 34431

Title	T
Name	ALBERTSON, SUE
Address	1633 N. SHADOWVIEW PATH
City-State-Zip:	HERNANDO FL 34442

Title	S
Name	BAILEY, JAN
Address	1248 W SKYVIEW CROSSING DR
City-State-Zip:	HERNANDO FL 34442

Title	VP
Name	ROCHE, ELAINE
Address	2168 N WATERSEDGE DRIVE
City-State-Zip:	CRYSTAL RIVER FL 34429

Title	DIRECTOR
Name	WELLS, REYNOLD
Address	819 INVERIE DRIVE
City-State-Zip:	INVERNESS FL 34453

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:** SUE ALBERTSON**TREASURER****03/25/2023**

Electronic Signature of Signing Officer/Director Detail

Date