

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744056

Entity Name: CITIZENS FOR THE OLD LUTZ SCHOOL BUILDING, INC.**Current Principal Place of Business:**18819 US.S HIGHWAY NO. 41
LUTZ, FL 33549**Current Mailing Address:**105 2ND AVE., SE
LUTZ, FL 33549**FEI Number: 59-2945889****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEVEL, BEN
18602 SAN RIO CIRCLE
LUTZ, FL 33549 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:** BEN NEVEL

04/04/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|----------------------|
| Title | PRESIDENT |
| Name | NEVEL, BEN |
| Address | 18602 SAN RIO CIRCLE |
| City-State-Zip: | LUTZ FL 33549 |

| | |
|-----------------|--------------------|
| Title | D |
| Name | HOEDT, LAWRENCE WR |
| Address | 1312 151ST AVENUE |
| City-State-Zip: | LUTZ FL 33549 |

| | |
|-----------------|-----------------|
| Title | T |
| Name | PITTMAN, ELAINE |
| Address | 105 2ND AVE SE |
| City-State-Zip: | LUTZ FL 33549 |

| | |
|-----------------|----------------------|
| Title | D |
| Name | NEVEL, BETH |
| Address | 18602 SAN RIO CIRCLE |
| City-State-Zip: | LUTZ FL 33549 |

| | |
|-----------------|-------------------|
| Title | DIRECTOR |
| Name | NEVEL-RADER, BETH |
| Address | 18811 - 4TH ST SE |
| City-State-Zip: | LUTZ FL 33549 |

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|-----------------|--------------------|
| Title | DIRECTOR |
| Name | ENSOR, STEPHANIE |
| Address | 18704 PLANNERS WAY |
| City-State-Zip: | LUTZ FL 33548 |

| | |
|-----------------|--------------------|
| Title | DIRECTOR |
| Name | ENSOR, TROY |
| Address | 18704 PLANNERS WAY |
| City-State-Zip: | LUTZ FL 33548 |

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: ELAINE A PITTMAN**TREASURER**

04/04/2023

Electronic Signature of Signing Officer/Director Detail

Date