

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009161

Entity Name: CITRUSMED, INC.**Current Principal Place of Business:**4175 WEST 20TH AVENUE
HIALEAH, FL 33012**Current Mailing Address:**4175 WEST 20TH AVENUE
HIALEAH, FL 33012**FEI Number:** 59-1865751**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JARDON, MARIO E
4175 WEST 20TH AVENUE
HIALEAH, FL 33012 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T/D
Name	PEREZ, EDUARDO
Address	4175 W 20TH AVE
City-State-Zip:	HIALEAH FL 33012

Title	VC/D
Name	SANJUAN, MARIA
Address	4175 W 20TH AVE
City-State-Zip:	HIALEAH FL 33012

Title	S/D
Name	LOPEZ, GIL DR.
Address	4175 W 20TH AVE
City-State-Zip:	HIALEAH FL 33012

Title	C/D
Name	FORTE, JORGE
Address	4175 WEST 20TH AVE
City-State-Zip:	HIALEAH FL 33012

Title	PCEO
Name	JARDON, MARIO E
Address	4175 W 20TH AVENUE
City-State-Zip:	HIALEAH FL 33012

Title	DIRECTOR
Name	HOOVER, SANDY
Address	4175 WEST 20TH AVENUE
City-State-Zip:	HIALEAH FL 33012

Title	DIRECTOR
Name	CASTRO, CARIDAD DR.
Address	4175 WEST 20TH AVENUE
City-State-Zip:	HIALEAH FL 33012

Title	DIRECTOR
Name	CLARKE, CYNTHIA DR.
Address	4175 WEST 20TH AVENUE
City-State-Zip:	HIALEAH FL 33012

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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: MARIO E. JARDON**PRESIDENT AND CEO****04/30/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CORTES-SUAREZ, GEORGINA
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR
Name CROYSDALE, PATRICIA
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR
Name TAYLOR, CURTIS
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR
Name COVERSON, TYRONE L.
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012

Title DIRECTOR
Name JOSEPH, JAY
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012