

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05629

**Entity Name:** THE CITRUS OAKS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O AMERICAN HOME TEAM REALTY, LLC  
253 PLAZA DRIVE, SUITE D  
OVIEDO, FL 32765

**Current Mailing Address:**

C/O AMERICAN HOME TEAM REALTY, LLC  
253 PLAZA DRIVE, SUITE D  
OVIEDO, FL 32765 US

**FEI Number:** 59-2336316

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

AMERICAN HOME TEAM REALTY, LLC  
C/O AMERICAN HOME TEAM REALTY, LLC  
253 PLAZA DRIVE, SUITE D  
OVIEDO, FL 32765 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:** DARCIE ENGLERT

**02/23/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MEUSEL, FREDERICK  
Address        C/O AMERICAN HOME TEAM REALTY,  
                    LLC  
                    253 PLAZA DRIVE, SUITE D  
City-State-Zip: OVIEDO FL 32765

Title            VP  
Name            COLOSI, FRANK  
Address        C/O AMERICAN HOME TEAM REALTY,  
                    LLC  
                    253 PLAZA DRIVE, SUITE D  
City-State-Zip: OVIEDO FL 32765

Title            SECRETARY  
Name            SIMMONS, MONICA  
Address        C/O AMERICAN HOME TEAM REALTY,  
                    LLC  
                    253 PLAZA DRIVE, SUITE D  
City-State-Zip: OVIEDO FL 32765

Title            CAM  
Name            ENGLERT, DARCIE  
Address        C/O AMERICAN HOME TEAM REALTY,  
                    LLC  
                    253 PLAZA DRIVE, SUITE D  
City-State-Zip: OVIEDO FL 32765

*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:** DARCIE ENGLERT

**CAM**

**02/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date