2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008456

Entity Name: COMMUNITY FOOD BANK OF CITRUS COUNTY, INC.

FILED Jan 17, 2018 **Secretary of State** CC6406500620

Current Principal Place of Business:

5259 W CARDINAL STREET

BUILDING B

HOMOSASSA, FL 34446

Current Mailing Address:

5259 W CARDINAL STREET **BUILDING B**

HOMOSASSA, FL 34446 US

FEI Number: 80-0459100 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUEKER, DUANE 5259 W CARDINAL STREET **BUILDING B** HOMOSASSA, FL 34446 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: DUANE DUEKER 01/17/2018

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

Name DUEKER, DUANE Name PONTICOS, STEVE

5259 W CARDINAL STREET 5259 W CARDINAL STREET Address Address **BUILDING B**

BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

Title **TREASURER** Title **SECRETARY**

Name CAPPUCCILLI, JOSEPH Name ORLITO, MICHAEL

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR Title DIRECTOR

BARNES, SEAN BENNETT, BART Name Name

5259 W CARDINAL STREET 5259 W CARDINAL STREET Address Address

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR Title DIRECTOR Name CASH, JOHNNY PAUL Name GOETHE. BEV

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

HOMOSASSA FL 34446 HOMOSASSA FL 34446 City-State-Zip: City-State-Zip:

Continues on page 2

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: DUANE DUEKER PRESIDENT, BOARD OF 01/17/2018 DIRECTORS

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name GRUBER, ED Name HILSDON, STEVEN

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR Title DIRECTOR

Name KENNEY, JOHN JJ Name LAMB, JEWEL

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

Title DIRECTOR Title EXECUTIVE DIRECTOR, MANAGER

Name PRENDERGAST, NAOMI Name AUTRY, JOHN

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446

TitleWAREHOUSE MANAGERTitleOFFICE MANAGERNameJONES, SHARONNameFRAMPTON, SUSAN

Address 5259 W CARDINAL STREET Address 5259 W CARDINAL STREET

BUILDING B BUILDING B

City-State-Zip: HOMOSASSA FL 34446 City-State-Zip: HOMOSASSA FL 34446