

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16256

**FILED**  
**Apr 30, 2022**  
**Secretary of State**  
**7985034668CC**

**Entity Name:** THE GLEN HOMEOWNERS ASSOCIATION OF CITRUS COUNTY, INC.

**Current Principal Place of Business:**

2541 N RESTON TERRACE  
HERNANDO, FL 34442

**Current Mailing Address:**

2541 N RESTON TERRACE  
HERNANDO, FL 34442 US

**FEI Number: 59-2995238**

**Certificate of Status Desired: No**

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

VILLAGES SERVICES, INC.  
2541 N RESTON TERRACE  
HERNANDO, FL 34442 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: GERALYN BOND**

**04/30/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MARASCO, RAYMOND P  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title VP  
Name JOHNSTON, LARRY  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title PRESIDENT  
Name BOZEMAN, WILLIAM  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title SECRETARY  
Name MARASCO, DONNA  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title DIRECTOR  
Name MATTHEWS, ALLEN JR.  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title DIRECTOR  
Name VARRONE, JEFF  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title TREASURER  
Name BANDISH, MARY  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

Title DIRECTOR  
Name JONES, KATHRYN  
Address 2541 N RESTON TERRACE  
City-State-Zip: HERNANDO FL 34442

*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: WILLIAM BOZEMAN**

**PRESIDENT**

**04/30/2022**

Electronic Signature of Signing Officer/Director Detail

Date