

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N17000009683

**Entity Name:** CITRUS ISLE HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.

**Current Principal Place of Business:**

346 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

346 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880 US

**FEI Number: 83-1816090**

**Certificate of Status Desired: No**

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

PRIME COMMUNITY MANAGEMENT  
346 EAST CENTRAL AVENUE  
WINTER HAVEN, FL 33880 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: SHARON GASTELBONDO**

**11/18/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DEGRAAF, JOEL  
Address        760 CITRUS ISLE DRIVE  
City-State-Zip: DAVENPORT FL 33837  
  
Title            SECRETARY, TREASURER  
Name            TAYLOR, ALIDA  
Address        204 CITRUS ISLE LOOP  
City-State-Zip: DAVENPORT FL 33837

Title            VP  
Name            RICHANI, GABRIELA  
Address        562 CITRUS ISLE BOULEVARD  
City-State-Zip: DAVENPORT FL 33837

*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: JOEL DEGRAAF**

**PRESIDENT**

**11/18/2021**

Electronic Signature of Signing Officer/Director Detail

Date