

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17632

**Entity Name:** CITRUS HILLS WOMEN'S CLUB, INC.**Current Principal Place of Business:**509 E HARTFORD ST  
HERNANDO, FL 34442**Current Mailing Address:**P. O .BOX 1494  
HERNANDO, FL 34442 US**FEI Number:** 59-2952634**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOPER, PATRICIA ANN  
4195 N MONADNOCK ROAD  
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:** PATRICIA A SOPER

04/27/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CO PD  
Name KELLOW, NANCY  
Address 5945 N. OAKMONT DRIVE  
City-State-Zip: PINE RIDGE FL 34465

Title CO VPD  
Name CRAWLEY, PAT  
Address 956 W. SKYVIEW LANDINGS DRIVE  
City-State-Zip: HERNANDO FL 34442

Title CO VPD  
Name UVA, DENISE  
Address 435 E. KELLER COURT  
City-State-Zip: HERNANDO FL 34442

Title T  
Name SOPER, PAT  
Address 384 E. IRELAND COURT  
City-State-Zip: HERNANDO FL 34442

Title 2ND CO VPD  
Name DORAN, NINA  
Address 1517 N. DIMAGGIO PATH  
City-State-Zip: HERNANDO FL 34442

Title 2ND CO VPD  
Name JOHNSTON, MICKEY  
Address 1004 W. SKYVIEW LANDINGS DRIVE  
City-State-Zip: HERNANDO FL 34442

Title SECRETARY  
Name MATROSIC, JOANIE  
Address 191 EAST KELLER COURT  
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:** PATRICIA ANN SOPER**TREASURER**

04/27/2018

Electronic Signature of Signing Officer/Director Detail

Date