2024 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

Name and Address of Current Registered Agent:

ST. MARTIN, DEBORAH CO-TREASURER 1847 W JENA COURT LECANTO, FL 34461 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	E DEBORAH ST. MARTIN		04/26/2024			
	Electronic Signature of Registered Agent		Date			
Officer/Director Detail :						
Title	CO-PRES, /DIRECTOR	Title	CO-PRES/DIRECTOR			
Name	CRAWLEY, PATRICIA CO- PRES/DIRECTOR	Name	TROWBRIDGE, DIANE CO PRES/DIRECTOR			
Address	956 W. SKYVIEW LANDINGS DRIVE	Address	1960 N ROSE HUE PATH			
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442			
Title	CO IST VP/DIRECTOR	Title	CO 1ST VP			
Name	GANNON, ELIZABETH CO IST VP/DIRECTOR	Name	BLACKIE, DEBBY CO-1S VP/DIRECTOR			
Address	1049 W RETRIEVER COURT	Address	782 N. HUNT CLUB DRIVE			
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442			
Title	CO 2ND VP/DIRECTOR	Title	2ND CO VP/DIRECTOR			
Name	EDWARDS, DIANE CO 2ND VP/DIRECTOR	Name	BOCKIARO, GAIL 2ND CO VP/DIRECTOR			
Address	4195 N. MONADNOCK ROAD	Address	898 W. SKYVIEW CROSSING DR			
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442			
Title	CO SECRETARY	Title	CO SECRETARY/DIRECTOR			
Name	ILER, MARTA CO.SEC/DIRECTOR	Name	GILLISPIE, DEL CO.SECRETARY/DIRECTOR			
Address	1438 W. CROSSVIEW WAY	Address	1025 W. RETRIEVER COURT			
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442			

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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: DEBORAH ST. MARTIN

CO-TREASURER/DIRECTOR 04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 26, 2024 Secretary of State 1045001148CC

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	CO- TREASURER	Title	CO-TREASURER
Name	ST. MARTIN, DEBORAH CO - TREASURER/DIRECTOR	Name	PANKOSKY, BARBARA CO- TREASURER/DIRECTOR
Address	1847 W. JENA COURT	Address	1768 W. ANGELICA LOOP
City-State-Zip:	LECANTO FL 34461	City-State-Zip:	LECANTO FL 34461