SIGNATURE	MARIBEL RICHER		
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	PRESIDENT	Title	VP
Name	CRUZ, BENJAMIN	Name	CEBOLLERO, WILFRED
Address	1295 W SKYVIEW CROSSING DRIVE	Address	1522 N EAGLE RIDGE PATH
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442
Title	DIRECTOR	Title	DIRECTOR
Name	TORRES, AMELIA	Name	CAPELLA, MARIA
Address	5 PEACHWOOD POINT	Address	45 LIVINGSTONE DAISY COURT
City-State-Zip:	HOMOSASSA FL 34446	City-State-Zip:	HOMOSASSA FL 34446
Title	DIRECTOR	Title	DIRECTOR
Name	MORALES, JOSE	Name	RODRIGUEZ, FRED
Address	1630 W CAROLINE PATH	Address	P.O. BOX 1393
City-State-Zip:	LECANTO FL 34461	City-State-Zip:	DUNNELLON FL 34430
Title	TREASURER	Title	RECORDING SECRETARY
Name	RODRIGUEZ, JEANETTE	Name	VELEZ, CARMEN
Address	P.O. BOX 1393	Address	4324 N INDIANHEAD ROAD
City-State-Zip:	DUNNELLON FL 34430	City-State-Zip:	HERNANDO FL 34442

RICHER, MARIBEL MRS

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.

Entity Name: SPANISH-AMERICAN CLUB OF CITRUS COUNTY, INC.

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

926 E. TRIPLE CROWN LOOP HERNANDO, FL 34442

DOCUMENT# N22101

Current Mailing Address:

P.O. BOX 2591 INVERNESS. FL 34451

FEI Number: 59-2880238

Name and Address of Current Registered Agent:

926 E. TRIPLE CROWN LOOP HERNANDO, FL 34442 US

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: BENJAMIN CRUZ

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.

PRESIDENT OF SAC

03/13/2018

FILED Mar 13, 2018 Secretary of State CC0716506840

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	CORRESPONDING SECRETARY	Title	DIRECTOR
Name	RODRIGUEZ, PJ	Name	VELEZ, TONY
Address	3651 E IBIS COVE COURT	Address	4324 N. INDIANHEAD ROAD
City-State-Zip:	HERNANDO FL 34442	City-State-Zip:	HERNANDO FL 34442