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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: AMANDA K. LANDAU

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 392926

Entity Name: CITRUS COUNTY PROPERTIES, INC.

Current Principal Place of Business:

7855 TROY HILLS LN JACKSONVILLE, FL 32256-1488

Current Mailing Address:

7855 TROY HILLS LN JACKSONVILLE, FL 32256-1488 US

FEI Number: 59-1474115

Name and Address of Current Registered Agent:

LANDAU, AMANDA K. 7855 TROY HILLS LN JACKSONVILLE, FL 32256 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PDST	Title	VPD
Name	LANDAU, AMANDA K.	Name	LANDAU, KIRK M.
Address	7855 TROY HILLS LN	Address	7855 TROY HILLS LN
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256

by 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 unde

04/18/2021 Date

FILED Apr 18, 2021 Secretary of State 8210070991CC

Certificate of Status Desired: No

Date