

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 359143

1. Entity Name
CITRA LAND HOLDING, INC.



Principal Place of Business
4800 NORTH HWY A1A, #210
VERO BEACH FL 32963

Mailing Address
334 NW 3RD AVE.
OCALA FL 34475

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90105 019 ***150.00



2. Principal Place of Business

117 Cache Cay Drive

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Vero Beach, FL

Zip

Country

32963

City & State

Zip

Country

4. FEI Number 59-1285008

Applied For
Not Applicable

5. Certificate of Status Desired - ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

MOSLEY, ROBBIE G.
17828 NE 18TH AVE.
CITRA FL 32113

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME PERRY, CHARLES W
STREET ADDRESS HIGHWAY 301
CITY-ST-ZIP CITRA FL 32113

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME LEMASTERS, SHELBY D
STREET ADDRESS 5 RIDGE TR
CITY-ST-ZIP ORMOND BCH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME LEMASTERS, W STEVEN
STREET ADDRESS 117 MANITOBA LANE
CITY-ST-ZIP MOORESVILLE NC 28115

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME LEMASTERS, JOHN N., III
STREET ADDRESS 116 HIDDEN OAK DR
CITY-ST-ZIP VERO BEACH FL 32963

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 117 Cache Cay Drive
CITY-ST-ZIP Vero Beach, FL 32963

TITLE ST ☐ Delete
NAME MOSLEY, ROBBIE G
STREET ADDRESS 17828 NE 18TH AVE
CITY-ST-ZIP CITRA FL 32113

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 609, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

JOHN N. LEMASTERS, PRESIDENT

John N. Lemasters

3/4/03

772 231 5622