

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721736

FILED
Apr 21, 2004
Secretary of State

Entity Name: REALTORS ASSOCIATION OF CITRUS COUNTY, INC.

Current Principal Place of Business:

1619 W. GULF TO LAKE HWY
LECANTO, FL 32661

New Principal Place of Business:

Current Mailing Address:

1619 W. GULF TO LAKE HWY
LECANTO, FL 32661

New Mailing Address:

1619 W. GULF TO LAKE HWY
LECANTO, FL 34461

FEI Number: 59-1743091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, ERNA
1619 W. GULF TO LAKE HWY
LECANTO, FL 32661 US

Name and Address of New Registered Agent:

ROSENBERGER, BONNIE
1619 W. GULF TO LAKE HWY
LECANTO, FL 32661 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: BONNIE ROSENBERGER

04/21/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COOK, BARRY
Address: 20 W NORVELL BRYANT HWY
City-St-Zip: HERNANDO, FL 34442

Title: PD () Delete
Name: BILY, JOY
Address: 730 N SUNCOAST BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: P () Delete
Name: BARNES, JOHN
Address: 4177 S. SUNCOAST BLVD.
City-St-Zip: HOMOSASSA, FL 34446

Title: S () Delete
Name: STANTON, ERNA,
Address: 1619 W GULF TO LAKE HWY
City-St-Zip: LECANTO, FL

Title: D () Delete
Name: HEDICK, ROBERT JR.
Address: 5 WILLIAM TELL LANE
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAMILTON, CAROL
Address: 2717 HWY 44 W
City-St-Zip: INVERNESS, FL 34453

Title: P (X) Change () Addition
Name: BILY, JOY
Address: 730 N SUNCOAST BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: PD (X) Change () Addition
Name: WADE, GENE
Address: 210 N MONTGOMERY AV
City-St-Zip: INVERNESS, FL 34452

Title: S (X) Change () Addition
Name: ROSENBERGER, BONNIE
Address: 1619 W GULF TO LAKE HWY
City-St-Zip: LECANTO, FL 34461

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BONNIE ROSENBERGER

S

04/21/2004

Electronic Signature of Signing Officer or Director

Date