2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721736

1. Entity Name

FILED Jan 27, 2003 8:00 am **Secretary of State**

01-27-2003 90227 047 ****61.25

REALTOR	S ASSOCIATION OF CITRUS	COUNTY, INC.		2 00 WE						
Principal Place of Business 1619 W. GULF TO LAKE HWY LECANTO FL 32661		Mailing Address 1619 W. GULF TO LAKE HWY LECANTO FL 32661								
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2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State				4. FEI Number 59-1743091 Applied For Not Applicable				
Zip	Country	Zip	. Co	ountry		5. Certificate o	of Status Desired		\$8.75 Ad	ditional
	6. Name and Address of Current	Registered Agent		-		7. Name and /	Address of Nev	v Registere		
				⁷ Name						
STANTON, ERNA		Street Addres			Idress (P.C). Box Number	r.is Not Accepta	ble) '	·	
1619 W. GULF TO LAKE HWY LECANTO FL 32661					· · · · ·	4 (A) (A)				
LECANIN	J FL 32001			City	<u> </u>	<u> </u>	<u> </u>		■ / Zip Cod	la .
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	e named entity submits this statement for tions of registered agent.	r the purpose of chan	nging its register	ered office or re	registered	agent, or both	n, in the State of	Florida, I a	m familiar with,	and accept
me sang-	; •									
SIGNATURE	<u> </u>									
	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Register	rød Agent signature	e required wh	en reinstating)		DATE		
	Signature, typed or printed name of registered agent a	9. Elect	(NOTE: Register) tion Campaign I t Fund Contribut	Financing _		5.00 May Bedded to Fees		lake Che	ck Payable artment of	
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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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a other like empowered.

SIGNATURE:

1-23-03

352-<u>746-7550</u>