

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727386

FILED
Jan 10, 2007
Secretary of State

Entity Name: CITRUS COUNTY ART LEAGUE, INC.

Current Principal Place of Business:

2644 N. ANNAPOLIS AVENUE
HERNANDO, FL 34442

New Principal Place of Business:

Current Mailing Address:

2644 N. ANNAPOLIS AVENUE
HERNANDO, FL 34442

New Mailing Address:

FEI Number: 23-7377991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, SHARON
3221 W. BLOSSOM DR
BEVERLY HILLS, FL 34465 US

Name and Address of New Registered Agent:

HARRIS, SHARON
2795 W. SUNRISE ST.
LECANTO, FL 34461 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: SHARON L. HARRIS

01/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRIS, SHARON
Address: 3221 W BLOSSOM DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VD () Delete
Name: HARRISON, HOWARD
Address: 571 W. MASSACHUSETTS ST
City-St-Zip: HERNANDO, FL 34442

Title: TD () Delete
Name: PROCTOR, OTTILIE
Address: 271 N. IRESNO AVE
City-St-Zip: HERNANDO, FL 34442

Title: SD () Delete
Name: CHESNOVITZ, WENDY
Address: 303 W. MASSACHUSETTS ST
City-St-Zip: HERNANDO, FL 34442

Title: SD () Delete
Name: DE TORRES, JACKIE
Address: 3203 S. GRAYMOR PATH
City-St-Zip: INVERNESS, FL 34452

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARRIS, SHARON
Address: 2795 W. SUNRISE ST.
City-St-Zip: LECANTO, FL 34461

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

Title: TD (X) Change () Addition
Name: CHESNOVITZ, JOHN
Address: 303 W. MASSACHUSETTS ST
City-St-Zip: HERNANDO, FL 34442

Title: SD (X) Change () Addition
Name: DEPINTO, JULIE
Address: 4085 N. RINGWOOD CIRCLE
City-St-Zip: HERNANDO, FL 34442

Title: VP (X) Change () Addition
Name: DE TORRES, JACKIE
Address: 3203 S. GRAYMOR PATH
City-St-Zip: INVERNESS, FL 34452

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHARON L. HARRIS

PRES

01/10/2007

Electronic Signature of Signing Officer or Director

Date