2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2007 8:00 am
Secretary of State
03-20-2007 90017 011 ****61.25

DOCUMENT # 734637

1. Entity Name

CITRUS SHRINE CLUB HOLDING CORPORATION, INC.

Principal Place of Business	Mailing Address
CITRUS SHRINE CLUB 468 N. WOODSLAKE AVE. INVERNESS FL 34465 US	CITRUS SHRINE CLUB P.O. BOX 1551 INVERNESS FL 34451-1551 US

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7429411 ☐ 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
~~RAYMOND, WALLACE H~~ ~~10279 S SAND CREEK TERRACE~~ ~~INVERNESS FL 34452~~	Name C.A. HAMMER Street Address (P.O. Box Number is Not Acceptable) 165 W. HERNDON ST. City HERNANDO FL Zip Code 34442

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 C.A. Hammer, C.A. HAMMER, SEC/TREAS. MARCH 8, 2007
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT ~~SMITH, GLENN L~~ ~~P.O. BOX 544~~ ~~FLORAL CITY FL 34436~~	☑ Delete	PT KENDALL R. TOMPKINS 3868 N. EVERLASTING DRIVE BEVERLY HILLS, FL 34465	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1SVP ~~NUSSO, ALANN F~~ ~~6225 E. MALVERNE ST~~ INVERNESS FL 34452	☑ Delete	1SVP RON HATTON 2201 E. CAMBRIDGE LANE INVERNESS, FL 34453	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT ~~WALLEN, RALPH W~~ ~~10054 HERNANDO RIDGE RD~~ ~~WEEKI WACHEE FL 34613~~	☑ Delete	TT/ST C.A. HAMMER 165 W. HERNDON ST. HERNANDO, FL 34442	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST ~~RAYMOND, WALLACE H~~ ~~10279 S SAND CREEK TERRACE~~ ~~INVERNESS FL 34452~~	☑ Delete		☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COD OWEN, ROBERT H 4400 N. ELKCAM BLVD BEVERLY HILLS FL 34465	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 all other like empowered.

SIGNATURE: C.A. Hammer, C.A. HAMMER MARCH 8, 2007 352/527-8787
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #