

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northrup
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739296 (2)
1. Corporation Name
CITRUS COUNTY CHAMBER OF COMMERCE, INC.

Principal Place of Business: 208 W MAIN ST INVERNESS FL 32650
Mailing Address: 208 W MAIN ST INVERNESS FL 32650

2. Principal Place of Business, 2a. Mailing Address, 22. Suite, Apt. #, etc., 23. City & State, 24. Zip, 25. Country, 26, 27, 28, 29, 30

APPROVED AND FILED
95 MAY -1 AM 9:55
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/08/1977
3a. Date of Last Report: 01/25/1994

4. FEI Number: 59-0898256
Applied For: Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
FITZPATRICK, RICHARD
213 N. APOPKA AVENUE
INVERNESS FL 32650

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and the filer (applicable) (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DAVIS, CHARLES	11 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, CHARLES	12 NAME	R. Stewart Grumbling, II
STREET ADDRESS	3075 S FLORIDA AVE	13 STREET ADDRESS	1011 S. Florida Ave.
CITY - ST - ZIP	INVERNESS FL	14 CITY - ST - ZIP	Inverness FL, 34450
TITLE	VD GRUMBLING, STEWART	21 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRUMBLING, STEWART	22 NAME	Rocky Hensley
STREET ADDRESS	1011 S FLORIDA AVE	23 STREET ADDRESS	408 US HWY 41 S
CITY - ST - ZIP	INVERNESS FL	24 CITY - ST - ZIP	Inverness FL 34450
TITLE	SD MILLER, LINDA	31 TITLE	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, LINDA	32 NAME	Linda Gallant
STREET ADDRESS	1007 W MAIN ST	33 STREET ADDRESS	P O BOX 909 (NA)
CITY - ST - ZIP	INVERNESS FL	34 CITY - ST - ZIP	Floral City FL, 34436
TITLE	TD RILING, LINDA	41 TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RILING, LINDA	42 NAME	Art Krueger
STREET ADDRESS	7607 S FLORIDA AVE	43 STREET ADDRESS	1007 US Hwy 41 S
CITY - ST - ZIP	FLORAL CITY FL	44 CITY - ST - ZIP	Inverness FL 34450
TITLE	D DINGLER, DENNY	51 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DINGLER, DENNY	52 NAME	Charles E. Davis
STREET ADDRESS	1438 NORTH HWY 41	53 STREET ADDRESS	3075 S. Florida Ave.
CITY - ST - ZIP	INVERNESS FL	54 CITY - ST - ZIP	Inverness FL 34450
TITLE	D FALLON, JOE	61 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FALLON, JOE	62 NAME	Linda Miller
STREET ADDRESS	234 HWY 41 N	63 STREET ADDRESS	1007 W Main St
CITY - ST - ZIP	INVERNESS FL	64 CITY - ST - ZIP	Inverness FL, 34450

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the simplified filing procedure under s. 67.0316, Florida Statute. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that no change of 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; that I am a resident of this state; and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:  ROCKY Hensley 4-19-95 904-726-2801