

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749657

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** THE CITRUS COUNTY HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

ONE COURTHOUSE SQ  
INVERNESS, FL 34450 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE COURTHOUSE SQ  
INVERNESS, FL 34450 US

**New Mailing Address:**

**FEI Number:** 59-2326836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GRANNAN, JOHN A  
ONE COURTHOUSE SQUARE  
INVERNESS, FL 34450 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GRANNAN, JOHN  
Address: P.O. BOX 359  
City-St-Zip: LECANTO, FL 34460 US

Title: VP  
Name: DUMAS, RON  
Address: 324 CAMELLIA ST  
City-St-Zip: INVERNESS, FL 34452

Title: S  
Name: HARTMAN, TERRI  
Address: 565 S, HWY 41  
City-St-Zip: INVERNESS, FL 34450

Title: T  
Name: PADGETT, SHARON  
Address: POST OFFICE BOX 97  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D  
Name: ROBERTS, ROBERT R  
Address: 225 S STARLIT PT  
City-St-Zip: INVERNESS, FL 34450

Title: D  
Name: JORDAN, MARILYN  
Address: 3530 E. FOXWOOD CIRCLE  
City-St-Zip: INVERNESS, FL 34452

I hereby 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 all other like empowered.

SIGNATURE: JOHN A. GRANNAN

PRES

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date