


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # 846859 1. Entity Name CITRUS PUBLISHING, INC.	
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Principal Place of Business 1624 N. MEADOWCREST CRYSTAL RIVER, FL 34429 US	Mailing Address 150 WEST BRAMBLETON AVENUE NORFOLK, VA 23510 US
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01222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-1145119	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ABERNATHY, MICHAEL G 601 TAYLORSVILLE ROAD SHELBYVILLE, KY 40065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS PITTMAN, COLLEEN 150 W BRAMBLETON AVE NORFOLK, VA 23510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRIDDELL, GUY 150 W BRAMBLETON AVE NORFOLK, VA, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GOETZ, SUSAN S 150 W BRAMBLETON AVE NORFOLK, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MILLER, GARY D. 601 TAYLORSVILLE RD SHELBYVILLE, KY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MULLIGAN, GERARD 1624 N MEADOWCREST BLVD CRYSTAL RIVER, FL

U00000620003
02/09/07-80019-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: Susan S. Goetz Susan S. Goetz 1/23/07 757-446-2013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #