

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1-2

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K89494** (4)

1. Corporation Name

CITRUS FINANCIAL SERVICES, INC.



Principal Place of Business

Mailing Address

1717 INDIAN RIVER BLVD.
P.O. BOX 2560
VERO BEACH FL 32961-9560

1717 INDIAN RIVER BLVD.
P.O. BOX 2560
VERO BEACH FL 32961-9560

3. Date Incorporated or Qualified
05/19/1989

3a. Date of Last Report
05/11/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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4. FEI Number

65-0136504

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COX JR., JOSSH C.
1295 WINDING OAKS CIRCLE EAST
VERO BEACH FL 32963**

81 Name

COX, JR. JOSH C.

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title, if applicable

JOSH C. COX, JR., DIRECTOR

4/26/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

BRACKETT, ROBERT L.

☐ DELETE

NAME

STREET ADDRESS

**4620 ROSEWOOD RD
VERO BEACH FL**

CITY - ST - ZIP

TITLE

WALLACH, KURT

☒ DELETE

NAME

STREET ADDRESS

**266 OCEAN WAY
VERO BCH FL -**

CITY - ST - ZIP

TITLE

GRAVES, JR. H

☐ DELETE

NAME

STREET ADDRESS

**4575 ROSEDALE RD
VERO BEACH FL**

CITY - ST - ZIP

TITLE

SCHUH, WILLIAM BRADLE

☒ DELETE

NAME

STREET ADDRESS

**640 N. CENTRE COURT S.W., #401
VERO BEACH FL -**

CITY - ST - ZIP

TITLE

MASTELLER, EARL H.

☐ DELETE

NAME

STREET ADDRESS

**869 ROBIN LN
SEBASTIAN FL**

CITY - ST - ZIP

TITLE

SCHLIT, LOUIS L.

☐ DELETE

NAME

STREET ADDRESS

**2410 47 TERR
VERO BEACH FL**

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOSH C. COX, JR., DIRECTOR

4/26/96

DATE

(407) 778-4100

DAYTIME PHONE #

CR2E034 (12/95)

DIRECTOR LIST CONTINUED FROM PAGE 1:

7.1	TITLE	D
7.2	NAME	COX JR., JOSH C.
7.3	STREET ADDRESS	1295 WINDING OAKS CIRCLE EAST
7.4	CITY-ST-ZIP	VERO BEACH, FL 32963

8.1	TITLE	D
8.2	NAME	LAMBERT, ROY H.
8.3	STREET ADDRESS	990 SANDFLY LANE
8.4	CITY-ST-ZIP	VERO BEACH, FL 32963