

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90122 044 \*\*\*150.00

DOCUMENT # K89494

1. Corporation Name  
CITRUS FINANCIAL SERVICES, INC.

Principal Place of Business  
1717 INDIAN RIVER BLVD.  
P.O. BOX 2560  
VERO BEACH FL 32961-9560

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
05/19/1989

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

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 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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 *Josh C. Cox, Jr.*  
Signature, typed or printed name of registered agent and title if applicable.

Josh C. Cox, Jr., Director

4/21/99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE Director ☐ Change ☒ Addition

NAME BRACKETT, ROBERT L.

1.2 NAME Cox, Jr., Josh C.

STREET ADDRESS 4620 ROSEWOOD RD

1.3 STREET ADDRESS 1295 Winding Oaks Circle East

CITY-ST-ZIP VERO BEACH FL

1.4 CITY-ST-ZIP Vero Beach, FL 32963

TITLE ☐ DELETE

2.1 TITLE Director ☐ Change ☒ Addition

NAME SMITH, JR. WALTER E.

2.2 NAME Lambert, Roy H.

STREET ADDRESS 8909 20TH STREET

2.3 STREET ADDRESS 990 Sandfly Lane

CITY-ST-ZIP VERO BCH FL

2.4 CITY-ST-ZIP Vero Beach, FL 32963

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME GRAVES JR, HUBERT

3.2 NAME

STREET ADDRESS 4575 ROSEDALE RD

3.3 STREET ADDRESS

CITY-ST-ZIP VERO BEACH FL

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME THOMPSON, JAMES R.

4.2 NAME

STREET ADDRESS 1250 A NW BENTLEY CIR

4.3 STREET ADDRESS

CITY-ST-ZIP PORT ST. LUICE FL

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME MASTELLER, EARL H.

5.2 NAME

STREET ADDRESS 869 ROBIN LN

5.3 STREET ADDRESS

CITY-ST-ZIP SEBASTIAN FL

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME SCHLITT, LOUIS L.

6.2 NAME

STREET ADDRESS 2410 47 TERR

6.3 STREET ADDRESS

CITY-ST-ZIP VERO BEACH FL

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE *Josh C. Cox, Jr.* Josh C. Cox, Jr., Director 4/21/99 (561) 778-4100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)