

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002689

FILED
Jan 25, 2011
Secretary of State

Entity Name: N.A.M.I. CITRUS COUNTY INC.

Current Principal Place of Business:

2575 S ZELLNER DR
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

2575 S ZELLNER DR
INVERNESS, FL 34450

New Mailing Address:

PO BOX 273
HOMOSASSA SPRINGS, FL 34750

FEI Number: 65-1034169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATTIN, DEBBIE D
2575 S ZELLNER DR
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

DIMINO, ANTHONY F
11796 W VALLEY SPRING LANE
HOMOSASSA, FL 34448 US

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: ANTHONY F DIMINO

01/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MOORE, MICHAEL
Address: 5219 S STEVEN DR
City-St-Zip: HOMOSASSA, FL 34448 US

Title: BD
Name: BOOTH, MARILYN
Address: 2412 S CARNEGIE DR
City-St-Zip: INVERNESS, FL 34450

Title: S
Name: GREGORY, MARY B
Address: 9 DAHOON COURT S
City-St-Zip: HOMOSASSA, FL 34446

Title: BD
Name: LATTIN, DEBBIE D
Address: 2575 S ZELLNER DR
City-St-Zip: INVERNESS, FL 34450

Title: VP
Name: AUSTIN, MITT
Address: 3550 N WILLOW TREE PT
City-St-Zip: BEVERLY HILLS, FL 34465

Title: T
Name: DIMINO, ANTHONY F
Address: 11796 W VALLEY SPRING LANE
City-St-Zip: HOMOSASSA, FL 34448

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: ANTHONY F DIMINO

T

01/25/2011

Electronic Signature of Signing Officer or Director

Date