

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003988

FILED
Jan 17, 2009
Secretary of State

Entity Name: CITRUS COUNTY CITIZENS ACADEMY ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

285 SO. KENSINGTON AVE.
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

285 SO. KENSINGTON AVE.
LECANTO, FL 34461 US

New Mailing Address:

FEI Number: 59-6000550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINHART, JOAN
285 S. KENSINGTON AVE
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

HUGHES, GAIL A
285 S. KENSINGTON AVE
LECANTO, FL 34461 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: GAIL A. HUGHES

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, HARRY
Address: 6415 E. GRAYSON STREET
City-St-Zip: INVERNESS, FL 34452

Title: VP () Delete
Name: QUARTION, ELAINE
Address: 1430 EAST MONOPOLY LOOP
City-St-Zip: INVERNESS, FL 34453

Title: S () Delete
Name: REINHART, JOAN
Address: 4167 N AMECHE TERRACE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: T () Delete
Name: HIDALGO, CHARLES
Address: 5506 S GRACIA TERRACE
City-St-Zip: INVERNESS, FL 34452

Title: D () Delete
Name: SCHMITT, GEORGE
Address: 1302 NORTH TIMUCUAN
City-St-Zip: INVERNESS, FL 34453

Title: D () Delete
Name: LOCHER, MAUREEN
Address: 11290 W CORAL COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: HUGHES, GAIL A
Address: 5966 E. HOLLY ST.
City-St-Zip: INVERNESS, FL 34452

Title: T (X) Change () Addition
Name: WAIBEL, R.C.
Address: 3830 N BRIARBERRY PT
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D (X) Change () Addition
Name: PALMER, JOHN
Address: 4750 N JADEMOOR DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GAIL A. HUGHES

S

01/17/2009

Electronic Signature of Signing Officer or Director

Date