2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007417

FILED Apr 13, 2008 Secretary of State

Entity Name: KEEP CITRUS COUNTY BEAUTIFUL INC.

Current Principal Place of Business:	New Principal Place of Business:
1700 FOREST DRIVE	

1700 FOREST DRIVE INVERNESS, FL 34453 US

Current Mailing Address: New Mailing Address:

PO BOX 94

LECANTO, FL 344600094 US

FEI Number: 59-3751769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLBERT, MICHAEL 4759 N. CRESTLINE DR. BEVERLY HILLS, FL 3446 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: COLBERT, MIKE Name: COLBERT, MICHAEL
Address: 4750 N. CRESTI NE DR

Address: 4759 N. CRESTLINE DR. Address: 4759 N. CRESTLINE DR. City-St-Zip: BEVERLY HILLS, FL 34465 City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete Title: () Change () Addition

 Name:
 YETNER, FRANK A
 Name:

 Address:
 PO BOX 78
 Address:

 City-St-Zip:
 LECANTO, FL 34460
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 METCALFE, SUSAN J
 Name:

 Address:
 PO BOX 340
 Address:

 City-St-Zip:
 LECANTO, FL 344600340
 City-St-Zip:

 Name:
 PETERSON, IRVIN L
 Name:
 PETERSON, IRVIN L

 Address:
 882 W. COLBERT CT.
 Address:
 882 W. COLBERT CT.

 City-St-Zip:
 BEVERLY HILLS, FL 34465
 City-St-Zip:
 BEVERLY HILLS, FL 34465

Name: TURCK, JOE Name: TURCK, JOE

Address: 3303 W. CARDINAL STREET
City-St-Zip: HOMOSASSA, FL 34446
Address: 3303 W. CARDINAL STREET
City-St-Zip: HOMOSASSA, FL 34446
City-St-Zip: HOMOSASSA, FL 34446

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: MICHAEL COLBERT P 04/13/2008