

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005929

FILED
Apr 30, 2006
Secretary of State

Entity Name: DRUG COALITION OF CITRUS COUNTY, INC.

Current Principal Place of Business:

2575 S. PANTHER PRIDE DR.
LECANTO, FL 34461 US

New Principal Place of Business:

110 N. APOPKA AVE.
INVERNESS, FL 34450 US

Current Mailing Address:

2575 S. PANTHER PRIDE DR.
LECANTO, FL 34461 US

New Mailing Address:

110 N. APOPKA AVE.
INVERNESS, FL 34450 US

FEI Number: 43-2055798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAMATO, DANIELLE
2575 S. PANTHER PRIDE DR.
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

DAMATO, DANIELLE
110 N. APOPKA AVE.
INVERNESS, FL 34450 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: DANIELLE DAMATO

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: FINEOUT, DIANNE
Address: 110 N. APOPKA AVE.
City-St-Zip: INVERNESS, FL 34450 US

Title: VC () Delete
Name: CUBBISON, MARY LEE
Address: 3238 S. LECANTO HWY.
City-St-Zip: LECANTO, FL 34461 US

Title: S () Delete
Name: VINCENT, DAVID
Address: 150 W. CITRUS SPRINGS BLVD.
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: T () Delete
Name: BOWMAN, DAVID
Address: 3700 W. SOVEREIGN PATH
City-St-Zip: LECANTO, FL 34461 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CUBBISON, MARY LEE
Address: P.O. BOX 131
City-St-Zip: LECANTO, FL 34460 US

Title: VC (X) Change () Addition
Name: LORENZO, EDWIN
Address: 110 N. APOPKA AVE.
City-St-Zip: INVERNESS, FL 34450 US

Title: S (X) Change () Addition
Name: FINEOUT, DIANNE
Address: 110 N. APOPKA AVE.
City-St-Zip: INVERNESS, FL 34450 US

Title: T (X) Change () Addition
Name: WOESSNER, PATRICIA
Address: 2575 S. PANTHER PRIDE DR.
City-St-Zip: LECANTO, FL 34461 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY LEE CUBBISON

C

04/30/2006

Electronic Signature of Signing Officer or Director

Date