

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90395 032 ****70.00

DOCUMENT # N04000006005

1. Entity Name
CITRUS COUNTY VETERANS FOUNDATION, INC.



Principal Place of Business
3600 WEST SOVEREIGN PATH
SUITE 180
LECANTO, FL 34461-7716

Mailing Address
670 W. PEARSON ST.
HERNANDO, FL 34442

50007844



2. Principal Place of Business

2804 W. MARK KNIGHTON CT. P.O. BOX 2065

3. Mailing Address

Suite, Apt. #, etc.

03152006 Chg-NP CR2E037 (11/05)

Suite, Apt. #, etc.
B 140

City & State
LECANTO, FL

City & State
LECANTO, FLORIDA

4. FEI Number
65-1232139

Applied For
Not Applicable

Zip
34461-8334

Country
CITRUS

Zip
34460-2065

Country
USA

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCLEOD, CARLTON J
670 W. PEARSON ST.
HERNANDO, FL 34442

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Carlton J. McLeod
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

March 21, 2006
DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MCLEOD, CARLTON J
STREET ADDRESS 670 W PEARSON STREET
CITY-ST-ZIP HERNANDO, FL 34442 ☐ Delete

TITLE VD
NAME EBITZ, CURTIS V
STREET ADDRESS 89 DOUGLAS STREET
CITY-ST-ZIP HOMOSASSA, FL 34446 ☐ Delete

TITLE SD
NAME RUDD, WALTER E
STREET ADDRESS 24 N. SHADOW WOOD DRIVE
CITY-ST-ZIP INVERNESS, FL 34450 ☐ Delete

TITLE TD ☒ Delete
NAME CHAPMAN, GERALD
STREET ADDRESS 600 W LIBERTY STREET
CITY-ST-ZIP HERNANDO, FL 34442

TITLE D ☐ Delete
NAME KENNEY, J.J.
STREET ADDRESS 17 GLOXINIAS COURT
CITY-ST-ZIP HERNANDO, FL 34446

TITLE D ☐ Delete
NAME PHILLIPS, VICKI
STREET ADDRESS 1100 N OTTAWA AVENUE
CITY-ST-ZIP LECANTON, FL 34461

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☐ Change ☒ Addition
NAME LEO PAUL LONGTIN
STREET ADDRESS 727 E. GAINES LN
CITY-ST-ZIP HERNANDO, FL 34442

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Walter E. Rudd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER E. RUDD

3/16/06

(352) 726-5091

Date Daytime Phone #