2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2010
Secretary of State

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Entity Name: CITRUS COUNTY VETERANS FOUNDATION, INC.

Current Principal Place of Business:

2804 W MARK KNIGHTON CT
SUITE B 140
LECANTO, FL 344618334 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2065
LECANTO, FL 344602065 US

New Mailing Address:

FEI Number: 65-1232139 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: MCLEOD, CARLTON J
Address: 670 W PEARSON STREET
City-St-Zip: HERNANDO, FL 34442 US

Title: VD
Name: EBITZ, CURTIS V
Address: 89 DOUGLAS STREET
City-St-Zip: HOMOSASSA, FL 34446 US

Title: SD
Name: PHILLIPS, VICKI T
Address: 1100 N OTTAWA AVENUE
City-St-Zip: LECANTO, FL 34461 US

Title: TD
Name: TRUAX, ROBERT
Address: 801 N. BERLIN POINT
City-St-Zip: INVERNESS, FL 34453 US

Title: D
Name: KENNEY, J.J.
Address: 17 GLOXINIAS COURT
City-St-Zip: HERNANDO, FL 34446 US

Title: D
Name: MILLS, BARBARA
Address: 163 N. BRIGHTON ROAD
City-St-Zip: LECANTO, FL 34461 US

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: VICKI T PHILLIPS SD 03/05/2010

Electronic Signature of Signing Officer or Director — Date