

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005217

FILED  
Mar 06, 2008  
Secretary of State

**Entity Name:** CITRUS FALLS COMMONS VILLAS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

C/O ERNEST L. MASCARA  
721 FIRST AVENUE NORTH  
ST PETERSBURG, FL 33701 US

**Current Mailing Address:**

THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST PETERSBURG, FL 33701

**New Mailing Address:**

C/O ERNEST L. MASCARA  
PO BOX 266  
ST PETERSBURG, FL 33731 US

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

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

MASCARA, ERNEST L  
THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST PETERSBURG, FL 33701 US

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

MASCARA, ERNEST L  
721 FIRST AVENUE NORTH  
ST PETERSBURG, FL 33701 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: ERNEST L. MASCARA

03/06/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: NOVAK, MICHAEL T JR.  
Address: 475 CENTRAL AVENUE, SUITE 202  
City-St-Zip: ST PETERSBURG, FL 33701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: NOVAK, MICHAEL T JR.  
Address: PO BOX 266  
City-St-Zip: ST PETERSBURG, FL 33731 US

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 T. NOVAK, JR.

PVST

03/06/2008

Electronic Signature of Signing Officer or Director

Date