

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008233

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** CITRUS WOODS HOMEOWNERS' ASSOCIATION OF CITRUS COUNTY, INC.

**Current Principal Place of Business:**

7470 W QUIANA LN  
DUNNELLON, FL 34433

**New Principal Place of Business:**

**Current Mailing Address:**

7470 W QUIANA LN  
DUNNELLON, FL 34433

**New Mailing Address:**

**FEI Number:** 14-1973074      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LASSITER, JANET L  
7209 W. CRINOLINE LN.  
DUNNELLON, FL 34433      US

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

NADAL, CHERYL  
7470 W. QUIANA LANE  
DUNNELLON, FL 34433      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: CHERYL NADAL

05/01/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D&V      ( ) Delete  
Name: MORTON, HAROLD  
Address: 1211 SE 3RD AVE  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: P      ( ) Delete  
Name: LASSITER, JANET L  
Address: 7209 W. CRINOLINE LN.  
City-St-Zip: DUNNELLON, FL 34433

Title: D&S      ( ) Delete  
Name: MATTINGLY, STEVE  
Address: 7172 W. INVIOUS LN.  
City-St-Zip: DUNNELLON, FL 34433

Title: D      (X) Delete  
Name: NADAL, CHERYL A  
Address: 7470 W. QUIANA LN.  
City-St-Zip: DUNNELLON, FL 34433

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P      (X) Change ( ) Addition  
Name: NADAL, CHERYL  
Address: 7470 W. QUIANA LANE  
City-St-Zip: DUNNELLON, FL 34433

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHERYL NADAL

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date