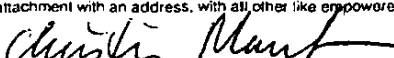


FILED
May 21, 2008 8:00 am
Secretary of State

04-22-2008 90015 013 ****61.25

DOCUMENT # N07000004599		Secretary of State 04-22-2008 90015 013 *****61.25	
1. Entity Name SENIOR FOUNDATION OF CITRUS COUNTY, INC.			
Principal Place of Business % COMMUNITY SUPPORT SERVICES 2804 MARC KNIGHTON COURT, SUITE B, RM. 129 LECANTO, FL 34461		Mailing Address % COMMUNITY SUPPORT SERVICES 2804 MARC KNIGHTON COURT, SUITE B, RM. 129 LECANTO, FL 34461	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent CLARDY, JOHN S III 521 W FORT ISLAND TRAIL SUITE A CRYSTAL RIVER, FL 34429		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 Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when resigning) DATE	
Filing Fee is \$61.25 Due by May 1, 2008		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D PEARSON, CATHY 2804 MARC KNIGHTON CT, STE B, RM 129 LECANTO, FL 34461 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	TREASURER TONY SANCHEZ 3102 S. BLACKMOUNTAIN DR. INVERNESS, FL 34450 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MARTENSSON, CHRISTINA K 2804 MARC KNIGHTON CT, STE B, RM 129 LECANTO, FL 34461 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	DIRECTOR DON MORAN 4720 W GYPSUM DR. BEECHDALE, FL 34465 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D CLARDY, JOHN S III 2804 MARC KNIGHTON CT, STE B, RM 129 LECANTO, FL 34461 ☒ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	V.P. WILLIS W. HEN 19506 W 190 Circle DUNELLON, FL 34432 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	Member at Large NEALE BRENNAN 1624 N. MEADOWCREST BLVD. CRYSTAL RIVER, FL 34429 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	Secretary JESSICA LAMBERT, Progrene Energy 15760 W. Powerline str. NAC CRYSTAL RIVER, FL 34428 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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: 		4-15-08 352-563-5372	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	