2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08249

FILED Jan 07, 2009 Secretary of State

Entity Name: RESIDENTS' ASSOCIATION OF CITRUS CENTER COLONY, INC.

Current Principal Place of Business: New Principal Place of Business: 1111 BEACON RD LAKELAND, FL 33803 US **Current Mailing Address: New Mailing Address:** 72 MANDARIN ST 19 MURCOTT ST LAKELAND, FL 33803 LAKELAND, FL 33803 FEI Number: 59-2870544 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GENTRY, BERNARD H DOUGHTY, GARY R CLARK, ĆAMPBELL & MAWHINNEY 205 CALAMONDIN ST. 500 SOUTH FLORIDA AVE, SUITE 800 US LAKELAND, FL 33801 LAKELAND, FL 33801 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: GARY R. DOUGHTY 01/07/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DOUGHTY, GARY DOUGHTY, GARY H Name: Name: 205 CALAMONDIN Address: 205 CALAMONDIN Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: LAKELAND, FL 33803 Title: () Delete Title: () Change () Addition SZUSZ, EDWARD Name: Name: Address: 222 CITRONELLE Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition MARTIN, FREIDA Name: Name: 72 MANDARIN STREET Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GEIST, LUCILLE Name: 19 MURCOTT STREET Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition OOMAN, SHIRLEY Name: Name: 110 SATSUMA ST Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: () Change () Addition ARCAND, DONNA Name: Name: Address: 63 MANDARIN ST Address: LAKELAND, FL 33803 City-St-Zip: 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: GARY H. DOUGHTY PRES 01/07/2009