2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N11042

Entity Name: CITRUS COUNTY CRUISERS, INCORPORATED

Current Principal Place of Business:

4319 N. DODGE CITY DR
BEVERLY HILLS, FL 34465 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2665
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2885929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUMP, RICHARD C
4319 N. DODGE CITY DR
BEVERLY HILLS, FL 34465 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 ( ) Delete
Name: STOLL, JUDITH
Address: 340 N HEDRICK AVE
City-St-Zip: LECANTO, FL 34461

Title: VD ( ) Delete
Name: GILLOTTE, HENRY
Address: 439 MICHAELMAS TERR
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete
Name: THOMAS, DOUGLAS
Address: 3880 N TALLAHASSEE RD
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: T ( ) Delete
Name: BUMP, RICHARD C
Address: 4319 N. DODGE CITY DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S ( ) Delete
Name: HAWKES, SANDRA
Address: 13 CUPANIA CT
City-St-Zip: HOMOSASSA, FL 34446

Title: D ( ) Delete
Name: MCGAHERAN, NANCY
Address: 5300 S MANATEE TERR
City-St-Zip: HOMOSASSA, FL 34446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: MCGARERAN, NANCY
Address: 5300 S MANATEE TERR
City-St-Zip: HOMOSASSA, FL 34446

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

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

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

Title: D (X) Change ( ) Addition
Name: MORAN, JAMES
Address: 5864 N SULTANA TERR
City-St-Zip: PINE RIDGE, FL 34465

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: RICHARD C BUMP T 01/11/2008

Electronic Signature of Signing Officer or Director — Date