2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16654

FILED Jan 07, 2010 Secretary of State

Entity Name: CITRUS COUNTY FAMILY RESOURCE CENTER, INC.

New Principal Place of Business: Current Principal Place of Business:

C/O GINGER WEST 2435 N FLORIDA AVE HERNANDO, FL 34442

New Mailing Address: Current Mailing Address:

C/O GINGER WEST 2435 N FLORIDA AVE HERNANDO, FL 34442

FEI Number: 59-2998366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WEST, GINGER(VIRGINI L MRS. 3595 É DIANA LN INVERNESS, FL 34453 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

WEST, VIRGINIA L MRS Name: Address: 3595 E DIANA LN City-St-Zip: INVERNESS, FL 34453

Title:

Name: CLEARY, MICHELLE MRS Address: 1782 E CLEVELAND ST City-St-Zip: HERNANDO, FL 34442

Title:

LANE, SHEARA Name: 301 S SEMINOLE AVE. Address: City-St-Zip: INVERNESS, FL 34452

Title:

Name: LEMIRE, NURIS

Address: 5270 W FIELD STREET City-St-Zip: HOMOSASSA, FL 34446

Title:

WALDERMAR, RICK Name: Address: PO BOX 2456 INVERNESS, FL 34450

City-St-Zip:

Title:

CLARK, DEBORAH Name: Address: 9856 W ARMS DR D1 CRYSTAL RIVER, FL 34429 City-St-Zip:

I hereby 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 all other like empowered.

VPD SIGNATURE: VIRGINIA L WEST 01/07/2010