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May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N18803** (9)

1. Corporation Name

CITRUS HILLS CIVIC ASSOCIATION, INC.

Principal Place of Business

PO BOX 1557
HERNANDO FL 34442-1557
US

Mailing Address

PO BOX 1557
HERNANDO FL 34442-1557
US

3. Date Incorporated or Qualified

01/20/1987

4. FEI Number

59-2746863

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRADY, MARJORIE F
282 N INDIANAPOLIS AVE
P O BOX 1856
HERNANDO FL 34442

81 Name

Catherine W Smith

82

Street Address (P.O. Box Number is Not Acceptable)

48 E Liberty ST.

83

84

City

Hernando

FL

85

Zip Code

34442

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Catherine W Smith

Apr. 28, 1998

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **TD** ☐ DELETE
NAME **RUGALA, MARY JANE**
STREET ADDRESS **179 EAST DAKOTA COURT**
CITY-ST-ZIP **HERNANDO FL**

TITLE **D** ☐ DELETE
NAME **CALDWELL, CHARLES**
STREET ADDRESS **286 E. DAKOTA CT.**
CITY-ST-ZIP **HERNANDO FL**

TITLE **VP** ☐ DELETE
NAME **MCLEOD, CARLTON J**
STREET ADDRESS **670 W PERSON ST**
CITY-ST-ZIP **HERNANDO FL**

TITLE **P** ☐ DELETE
NAME **TRAUX, ROBERT C.**
STREET ADDRESS **801 N. BERLIN PT.**
CITY-ST-ZIP **INVERNESS FL**

TITLE **D** ☐ DELETE
NAME **BRENT, JAMES W.**
STREET ADDRESS **172 E. DAKOTA CT.**
CITY-ST-ZIP **HERNANDO FL**

TITLE **VP** ☒ DELETE
NAME **SAKSON, MARYLEE**
STREET ADDRESS **240 W. CHASE ST.**
CITY-ST-ZIP **HERNANDO FL**

1.1 TITLE **DP** ☐ Change ☒ Addition
1.2 NAME **Dorothy Jo Russo**
1.3 STREET ADDRESS **480 E Epsom Ct**
1.4 CITY-ST-ZIP **Hernando, FL 34442**

2.1 TITLE **D** ☐ Change ☒ Addition
2.2 NAME **Gerald W. Harriman**
2.3 STREET ADDRESS **328 E Zoplin Ct**
2.4 CITY-ST-ZIP **Hernando, FL 34442**

3.1 TITLE **P** ☐ Change ☒ Addition
3.2 NAME **Minney D. Roseberry**
3.3 STREET ADDRESS **270 W. Liberty St.**
3.4 CITY-ST-ZIP **Hernando, FL 34442**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **D** ☒ Change ☐ Addition
6.2 NAME **MaryLee Sakson**
6.3 STREET ADDRESS **240 W Chase St.**
6.4 CITY-ST-ZIP **Hernando, FL 34442**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Mary Jane Rugala**

4/28/98 (352) 746-5017

CR2E037 (10/97)