

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18803

FILED  
Apr 10, 2009  
Secretary of State

**Entity Name:** CITRUS HILLS CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 1557  
HERNANDO, FL 344421557 US

**New Principal Place of Business:**

CITRUS HILLS VILLAGES  
HERNANDO, FL 344421557 US

**Current Mailing Address:**

PO BOX 1557  
HERNANDO, FL 344421557 US

**New Mailing Address:**

**FEI Number:** 59-2746863      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMITH, CATHERINE W  
48 E LIBERTY ST  
HERNANDO, FL 34442 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: TD ( ) Delete  
Name: RUGALA, MARY JANE  
Address: 179 EAST DAKOTA COURT  
City-St-Zip: HERNANDO, FL

Title: D ( ) Delete  
Name: LONGTIN, LEO PAUL  
Address: 727 E GAINES LANE  
City-St-Zip: HERNANDO, FL 34442

Title: D ( ) Delete  
Name: MCLEOD, CARLTON  
Address: 670 W PEARSON ST  
City-St-Zip: HERNANDO, FL 34442

Title: VP ( ) Delete  
Name: CLAYTON, ROBERT  
Address: 11 E LIBERTY ST  
City-St-Zip: HERNANDO, FL 34442

Title: V ( ) Delete  
Name: STOCK, LILLIAN  
Address: 535 HAMBLETONIAN DRIVE  
City-St-Zip: INVERNESS, FL 34453

Title: P ( ) Delete  
Name: WOOTEN, JOSH  
Address: P.O. BOX 341  
City-St-Zip: HERNANDO, FL 34442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: RUSSO, DOROTHY JO  
Address: 480 E. EPSOM CT.  
City-St-Zip: HERNANDO, FL 34442

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: ( ) Change ( ) Addition  
Name:  
Address:  
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: CATHERINE W. SMITH

SEC

04/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date