

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19570

FILED
Jan 11, 2010
Secretary of State

Entity Name: CLEARVIEW ESTATES OF CITRUS HILLS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1399 N. HAMBLETONIAN DR.
HERNANDO, FL 34442 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 386
HERNANDO, FL 34442 US

New Mailing Address:

FEI Number: 59-2788333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEMINATORE, BARBARA J
1399 N. HAMBLETONIAN DR.
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: P
Name: GUNDRUM, JACK W
Address: 615 N CHERRY POP DR
City-St-Zip: INVERNESS, FL 34453

Title: VP
Name: QUINN, JEANNE
Address: 1437 N. MAN O WAR DR.
City-St-Zip: HERNANDO, FL 34442

Title: TD
Name: SEMINATORE, BARBARA
Address: 1399 N HAMBLETONIAN DR
City-St-Zip: HERNANDO, FL 34442

Title: SD
Name: DORSEY, BETH
Address: 1211 N MAN O WAR DR
City-St-Zip: HERNANDO, FL 34442

Title: D
Name: KARL, THOMAS
Address: 1373 N HAMBLETONIAN DR
City-St-Zip: HERNANDO, FL 34442

Title: D
Name: RECKNER, JESSICA
Address: 1237 N MAN-O-WAR DR
City-St-Zip: HERNANDO, FL 34442

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.

SIGNATURE: BARBARA SEMINATORE

TD

01/11/2010

Electronic Signature of Signing Officer or Director

Date