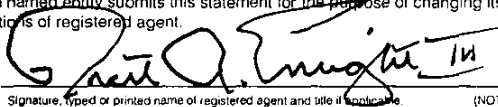
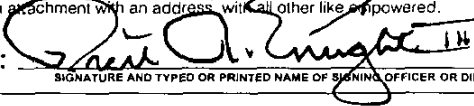


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2007 8:00 am
Secretary of State

07-24-2007 90040 013 ****61.25

DOCUMENT # N21702 1. Entity Name CITRUS GREENS AT ORANGE TREE HOMEOWNER'S ASSOCIATION, INC.					
Principal Place of Business 1130 GROVE DRIVE NAPLES, FL 34120			Mailing Address 1130 GROVE DR NAPLES, FL 34120		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		05022007 Chg-NP CR2E037 (12/06)
4. FEI Number 59-3637134 NOT APPLICABLE				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KRAUS & BALLENGER CHERYL R. KRAUS, P.A. 1072 GOODLETHER RD. NAPLES, FL 34102			7. Name and Address of New Registered Agent Name Robert A. Enright III Street Address (P.O. Box Number is Not Acceptable) 3120 Orange Grove Trail City Naples FL Zip Code 34120		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Signature, typed or printed name of registered agent and title if applicable 5-1-07 DATE					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZARANEK, TIMOTHY 3150 ORANGE GROVE TRAIL NAPLES, FL 34120	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Rev. Tony Masinelli 935 Summerfield Drive Naples FL 34120	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TISHON, JOHN 3071 ORANGE GROVE TRAIL NAPLES, FL 34120	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Melike Moss 954 Summerfield Drive Naples, FL 34120	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HALLMAN, NORMA 3051 ORANGE GROVE TRAIL NAPLES, FL 34120	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Dori Jordan 910 Summerfield Drive Naples, FL 34120	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HURM, SAMMY 3271 LEMON LANE NAPLES, FL 34120	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Robert A. Enright III 3120 Orange Grove Trail Naples, FL 34120	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCLAUGHLIN, MARRIE 701 MEYER DRIVE NAPLES, FL 34120	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			5-1-07 Date 239-274-8255 Daytime Phone #		