2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N24902

Entity Name: CITRUS POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7058 CITRUS POINT CT.
WINTER PARK, FL 327927563 US

New Principal Place of Business:

Current Mailing Address:

7058 CITRUS POINT CT.
WINTER PARK, FL 327927563 US

New Mailing Address:

FEI Number: 59-2890531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILBORN, ROBERT L
7058 CITRUS POINT CT.
WINTER PARK, FL 327927563 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: D ( ) Delete
Name: HALL, MAUREEN
Address: 7010 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP ( ) Delete
Name: PHILLIPS, LEONARD H
Address: 7017 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: P ( ) Delete
Name: COTE, BERNARD
Address: 7027 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: D ( ) Delete
Name: STUFF, ALFRED O
Address: 7005 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: S ( ) Delete
Name: LEWIS, GAIL
Address: 7039 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: T ( ) Delete
Name: PHILLIPS, JENNIFER
Address: 7017 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CUCCIA, FRANK
Address: 7013 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP (X) Change ( ) Addition
Name: TOWNSEND, CHRISTINE
Address: 7062 CITRUS POINT CT.
City-St-Zip: WINTER PARK, FL 32792 US

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: ROBERT L HILBORN RA 04/29/2009

Electronic Signature of Signing Officer or Director — Date