

FILED
Mar 09, 2005 8:00 am
Secretary of State

01-25-2005 90057 004 ****61.25

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N25592		
1. Entity Name CITRUS CIVITAN CLUB OF ORLANDO, INC.		

Principal Place of Business 111 N. ORANGE AVENUE, STE. 1010 ORLANDO, FL 32801 US	Mailing Address P.O BOX 2763 ORLANDO, FL 32802-2763 US
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66003830



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01042005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2887038	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PENDLETON, BREE M 111 N. ORANGE AVENUE SUITE 1010 ORLANDO, FL 32801		Name: <u>Radulski, Jonna</u> Street Address (P.O. Box Number is Not Acceptable): <u>111 N Orange Ave</u> <u>Suite 1010</u> City: <u>Orlando</u> FL Zip Code: <u>32801</u>	

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: Jonna Radulski Jonna Radulski - Treasurer 3/3/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RADULSKI, JONNA 111 N ORANGE AVENUE, SUITE 1010 ORLANDO, FL 32801 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD GILROY, HELEN 111 N. ORANGE AVE., SUITE 1010 ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SB ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PENDLETON, BREE M 111 N. ORANGE AVE., SUITE 1010 ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Mary Anne Nedavni 111 N Orange Ave Ste 1010 Orlando, FL 32801 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHEEHY, RYAN 200 EAST YALE STREET, APT. C ORLANDO, FL 32804 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Robert S. Hoofman 109 E Church St Fifth Floor Orlando, FL 32801 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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	VPD Andy S. Kroupa 1000 Legion Place Orlando, FL 32801 ☐ Change ☒ Addition

12. 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 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: Jonna Radulski Jonna Radulski 3/3/05 407-835-3017
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #