# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 21, 2005**
**Secretary of State**

DOCUMENT# N32206

**Entity Name:** CITRUS FINANCIAL CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

1717 INDIAN RIVER BLVD. 300
C/O LOUIS L. SCHLITT
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

1717 INDIAN RIVER BLVD. 300
C/O LOUIS L. SCHLITT
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number: 65-0180099** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

SCHLITT, LOUIS L.
1717 INDIAN RIVER BLVD. 300
VERO BEACH, FL 32960 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: DT ( ) Delete
Name: SCHLITT, LOUIS L.,
Address: 1717 INDIAN RIVER BLVD.
City-St-Zip: VERO BEACH, FL

Title: DP ( ) Delete
Name: BARTH, III, PHIL,
Address: 1717 INDIAN RIVER BLVD.
City-St-Zip: VERO BEACH, FL

Title: DS ( ) Delete
Name: SCHALL, JACK
Address: 1717 INDIAN RIVER BLVD
City-St-Zip: VERO BCH, FL

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

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 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 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: LOUIS L. SCHLITT DT 04/21/2005

Electronic Signature of Signing Officer or Director Date