

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41032

FILED
Apr 20, 2009
Secretary of State

Entity Name: CITRUS CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 540123
MERRITT ISLAND, FL 32954

New Principal Place of Business:

254 LAKE SHORE DRIVE
MERRITT ISLAND, FL 32953

Current Mailing Address:

P O BOX 540123
MERRITT ISLAND, FL 32954

New Mailing Address:

FEI Number: 59-3049114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRETTA, ALBERT C
254 LAKE SHORE DRIVE
MERRITT ISLAND, FL 32953 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: BARRETTA, ALBERT C
Address: 254 LAKE SHORE DR
City-St-Zip: MERRITT ISLAND, FL

Title: D () Delete
Name: ROWLAND, JOE
Address: 202 LAKE SHORE DR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: WEBER, PHIL
Address: 247 LAKE SHORE DR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: STAVROS, EVE
Address: 242 LAKE SHORE DR
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: HUBENY, TOM
Address: 252 LAKE SHORE DR
City-St-Zip: MERRITT ISLAND, FL 32953

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:

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: ALBERT C BARRETTA

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date