2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# N42698

Entity Name: CITRUS AMERICAN AND ITALIAN SOCIAL CLUB, INC.

Current Principal Place of Business:

4325 LITTLE AL PT
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2074
INVERNESS, FL 34451

New Mailing Address:

FEI Number: 59-3070435 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SNYDER, MARTHA J
217 TEMPLE STREET
INVERNESS, FL 34452 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:	P	( ) Delete
Name:	SNYDER, MARTHA J	
Address:	217 TEMPLE ST	
City-St-Zip:	INVERNESS, FL 34452	
Title:	T	( ) Delete
Name:	TRASCOY, ANGIE	
Address:	215 TEMPLE	
City-St-Zip:	INVERNESS, FL 34452	
Title:	T	( ) Delete
Name:	ROESEL, GLORIA	
Address:	2981 W OCALA ST	
City-St-Zip:	LECANTO, FL 34461	
Title:	T	( ) Delete
Name:	GOSSELIIN, SHIRLEY	
Address:	5641 S PLEASANT GROVE RD	
City-St-Zip:	INVERNESS, FL 34452	
Title:	T	( ) Delete
Name:	DELUCE, DELORES	
Address:	9775 W. HORSESHOE DR	
City-St-Zip:	BEVERLY HILLS, FL 34465	

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: MARTHA SNYDER PRES 01/27/2009

Electronic Signature of Signing Officer or Director — Date