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FILED

Feb 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44511 (6)

1. Corporation Name

ECONOMIC DEVELOPMENT ASSOCIATION OF CITRUS COUNT
Y, INC.

Principal Place of Business

Mailing Address

1520 N MEADOWCREST BLVD
CRYSTAL RIVER FL 34429-5956
US1520 N MEADOWCREST BLVD
CRYSTAL RIVER FL 34429-5756
US3. Date Incorporated or Qualified
07/24/19913a. Date of Last Report
02/07/19964. FEI Number
65-0353503

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CUNNINGHAM, KEVIN
2859 N CARL G ROSE HWY
HERNANDO FL 3444281 Name
F. GASTON HALL III

82 Street Address (P.O. Box Number is Not Acceptable)

4775 N. LECANTO HWY.

83

84 City
BEVERLY HILLS

FL

85 Zip Code
34465

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-28-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETE
NAME KITCHEN, RONALD
STREET ADDRESS 6222 CORPORATE OAKS DR
CITY-ST-ZIP CRYSTAL RIVER FL1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME CUNNINGHAM, KEVIN
STREET ADDRESS 2859 N. CARL G. ROSE HWY.
CITY-ST-ZIP HERNANDO FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE SD ☐ DELETE
NAME HOOPER, JEFFREY
STREET ADDRESS 184 W CHASE ST
CITY-ST-ZIP HERNANDO FL3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME HALL, GASTON
STREET ADDRESS 4775 N. LECANTO HWY
CITY-ST-ZIP BEVERLY HILLS FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE VD ☐ DELETE
NAME HAGAR, GREG
STREET ADDRESS 950 W MAIN ST
CITY-ST-ZIP INVERNESS FL5.1 TITLE CD ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE SD ☐ Change ☒ Addition
6.2 NAME MIKE HARBOUR
6.3 STREET ADDRESS 2800 W. HWY. 44
6.4 CITY-ST-ZIP INVERNESS, FL. 34451

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-97

352-795-2000

Date

Daytime Phone # 0085031

CR2E037 (9/96)