

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 05, 1999 8:00 am**  
**Secretary of State**

03-05-1999 90041 024 \*\*\*\*61.25

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**DOCUMENT # N45289**

1. Corporation Name

**CITRUS COUNTY SENIOR SPORTS ASSOCIATION, INC.**

Principal Place of Business

2380 NAUTILUS DR  
CITRUS SPRINGS FL 34434  
US

Mailing Address

2380 NAUTILUS DR  
CITRUS SPRINGS FL 34434  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

**09/24/1991**

4. FEI Number

**59-3081869**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

**BEATTY, EDGAR R.**  
**2380 NAUTILUS DR**  
**CITRUS SPRINGS FL 34435**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME BEATTY, EDGAR R.  
STREET ADDRESS 2380 NAUTILUS DR  
CITY-ST-ZIP CITRUS SPRINGS FL

☐ DELETE

TITLE VPD  
NAME DICKERSON, RICHARD  
STREET ADDRESS 3781 N PASSION WAY  
CITY-ST-ZIP BEVERLY HILLS FL

☐ DELETE

TITLE VPD  
NAME FINGAR, ARTHUR  
STREET ADDRESS 1350 W. BUTTONBUSH DR.  
CITY-ST-ZIP BEVERLY HILLS FL 34465

☒ DELETE

TITLE S  
NAME DIMAIO, MARIE  
STREET ADDRESS 9740 N. EMELIA AVE  
CITY-ST-ZIP CITRUS SPRINGS FL

☐ DELETE

TITLE T  
NAME DOCHERTY, JEAN  
STREET ADDRESS 550 W. SAND OAK COURT  
CITY-ST-ZIP BEVERLY HILLS FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME **VPD**  
3.3 STREET ADDRESS **PHELPS, RONALD**  
3.4 CITY-ST-ZIP **1897 N. SQUIRREL TREE AVE.**  
**LECANTO, FLA. 34461**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/99

352-489-7784

CR2E037 (11/98)