

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000692

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** CITRUS COUNTY COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business:**

450 PLEASANT GROVE ROAD  
INVERNESS, FL 34452

**New Principal Place of Business:**

**Current Mailing Address:**

450 PLEASANT GROVE ROAD  
INVERNESS, FL 34452

**New Mailing Address:**

**FEI Number:** 59-3511466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGHOUSE, DONNA  
501 E KENNEDY BLVD STE 1700  
TAMPA, FL 33607 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: TD  
Name: MCCRANIE, ROBERT E III  
Address: 450 PLEASANT GROVE ROAD  
City-St-Zip: INVERNESS, FL 34452

Title: T  
Name: DAVIS, CHARLIE  
Address: 3075 S. FLORIDA AVE  
City-St-Zip: INVERNESS, FL 34450

Title: TD  
Name: COLE, CHESTER V  
Address: 1315 N. VANNORTWICK ROAD  
City-St-Zip: LECANTO, FL 34461

I hereby 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 all other like empowered.

SIGNATURE: ROBERT E. MCCRANIE, III

TD

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date