

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002393

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: CITRUS "A"S INC.

## Current Principal Place of Business:

P.O. BOX 397  
INVERNESS, FL 34451

## New Principal Place of Business:

5532 S, ASHLEY TERRACE  
(SECRETARY'S RESIDENTIAL ADDRESS)  
INVERNESS, FL 34452

## Current Mailing Address:

P.O. BOX 397  
INVERNESS, FL 34451

## New Mailing Address:

FEI Number: 59-3240346      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITWORTH, ROBERT  
1241 W. STAFFORD ST.  
HERNANDO, FL 34442      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: DETOMASI, JERRY  
Address: 5454 S. CONCORD TERR  
City-St-Zip: INVERNESS, FL 34452

Title: VP ( ) Delete  
Name: LAUER, ERNIE  
Address: 131 DOUGLAS ST  
City-St-Zip: HOMOSASSA, FL 34446

Title: S ( ) Delete  
Name: HEATON, MARTHA  
Address: 419 S NESBITT TERR  
City-St-Zip: INVERNESS, FL 34450

Title: T ( ) Delete  
Name: WHITWORTH, ROBERT  
Address: 1241 W. STAFFORD ST.  
City-St-Zip: HERNANDO, FL 34442

Title: SEGN ( ) Delete  
Name: DAVIS, JACK D  
Address: 905 GREAT PINE POINT  
City-St-Zip: INVERNESS, FL 34452

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMALLWOOD, LENA  
Address: 2757 E. POSSUM COURT  
City-St-Zip: INVERNESS, FL 34452

Title: VP (X) Change ( ) Addition  
Name: LUMLEY, ROBERT  
Address: 3753 E. KIWI COVE COURT  
City-St-Zip: HERNANDO, FL 34442

Title: S (X) Change ( ) Addition  
Name: SAVELA, KAREN  
Address: 5532 S, ASHLEY TERRACE  
City-St-Zip: INVERNESS, FL 34452

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEGN (X) Change ( ) Addition  
Name: THOMPSON, WILLIAM M  
Address: 5532 S, ASHLEY TERRACE  
City-St-Zip: INVERNESS, FL 34452

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: KAREN SAVELA

SECY

01/15/2009

Electronic Signature of Signing Officer or Director

Date