
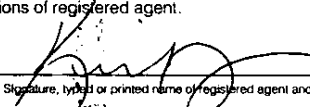
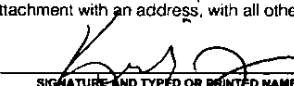


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90186 013 ****61.25

DOCUMENT # N94000002656 1. Entity Name CITRUS ISLE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 661 WILDFLOWER ST MERRITT ISLAND, FL 32953			Mailing Address P O BOX 540909 MERRITT ISLAND, FL 32954		
2. Principal Place of Business - No P.O. Box # 821 Wildflower St.		3. Mailing Address Suite, Apt. #, etc.			
City & State Merritt Island FL		City & State			
Zip 32953		Country USA		4. FEI Number 59-3246259	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MACIAS, KELLY L MRS 661 WILDFLOWER ST MERRITT ISLAND, FL 32953					
7. Name and Address of New Registered Agent Name: Kimberly Willey Street Address (P.O. Box Number is Not Acceptable): 821 Wildflower St. City: Merritt Island FL Zip Code: 32953					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  DATE: 4/15/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIMMER, WILLIAM MR. 641 WILDFLOWER ST MERRITT ISLAND, FL 32953	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PANKUCH, TODD 721 WILDFLOWER ST MERRITT ISLAND, FL 32953	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MACIAS, KELLY 661 WILDFLOWER ST MERRITT ISLAND, FL 32953	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Kimberly Willey 821 Wildflower St. Merritt Island, FL 32953 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COOPER, DIANE 2846 SEBASTIAN DRIVE MELBOURNE, FL 32935	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman Jacquie Williams 811 Wildflower St. Merritt Island, FL 32953 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIETZEN, MIKE MR 631 WILDFLOWER ST MERRITT ISLAND, FL 32953	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALLA, WILLIAM 621 WILD FLOWER ST MERRITT ISLAND, FL 32953	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman Bud McGinn 140 Wildflower St. Merritt Island FL 32953 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/15/07 (321)453-0904 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small>		