

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004334

FILED  
Jul 05, 2005  
Secretary of State

Entity Name: CITRUS FIGURE SKATING CLUB, INC.

**Current Principal Place of Business:**

THE ICE FACTORY  
2221 PARTIN SETTLEMENT RD  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

503 AVENUE J SE  
WINTER HAVEN, FL 33880 US

**New Mailing Address:**

FEI Number: 59-3245438      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LONG, CYNTHIA  
503 AVENUE J SE  
WINTER HAVEN, FL 33880 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: LONG, CYNTHIA M  
Address: 503 AVENUE J SE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: V ( ) Delete  
Name: CLEMENT, BONNIE  
Address: 291 FLORIDA PARKWAY  
City-St-Zip: KISSIMMEE, FL 34743 US

Title: D ( ) Delete  
Name: SHAW, JANE  
Address: 2560 DAVENPORT CIRCLE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: T ( ) Delete  
Name: RUPP, SHARON  
Address: 413 PENNSYLVANIA AVENUE  
City-St-Zip: ST. CLOUD, FL 34769

Title: D ( ) Delete  
Name: CHHIMA, CINDY  
Address: 1038 PLANTATION DRIVE D-12  
City-St-Zip: KISSIMMEE, FL 34741

Title: D (X) Delete  
Name: THOMPSON, LINDA  
Address: 828 SPRING PARK LOOP  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LONG, CYNTHIA C  
Address: 503 AVENUE J SE  
City-St-Zip: WINTER HAVEN, FL 33880

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

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

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

Title: D (X) Change ( ) Addition  
Name: VOLNIKH, VERA  
Address: 845 NEPTUNE POINT LANE  
City-St-Zip: KISSIMMEE, FL 34744

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CYNTHIA C. LONG

P

07/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date