

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000004658

FILED  
Jan 17, 2003  
Secretary of State

Entity Name: CITRUS 20/20 INC.

## Current Principal Place of Business:

C/O RICHARD CLAY  
330 N. BLUFFWOOD TERR.  
CRYSTAL RIVER, FL 34429 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1141  
LECANTO, FL 34460 US

## New Mailing Address:

FEI Number: 65-0616903

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLAY, RICHARD  
330 N. BLUFFWOOD TERR.  
CRYSTAL RIVER, FL 34429 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: DC ( ) Delete  
Name: ELAY, RICHARD  
Address: 330 N. BLUFFWOOD TERR.  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DV ( ) Delete  
Name: NAVE, PATIENCE  
Address: 40 PINE ST.  
City-St-Zip: HOMOSASSA, FL 34426

Title: DS ( ) Delete  
Name: PHILLIPS, CHERYL  
Address: 2218 N. WATERSLEDGE DR.  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DT (X) Delete  
Name: RENFRO, EDWARD  
Address: 2255 N. WATERSLEDGE DR.  
City-St-Zip: CRYSTAL RIVER, FL 34429

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change ( ) Addition  
Name: CLAY, RICHARD  
Address: 330 N. BLUFFWOOD TERR.  
City-St-Zip: CRYSTAL RIVER, FL 34429

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

Title: DST (X) Change ( ) Addition  
Name: ERICKSON, GUNNAR M  
Address: 5131 S MANATEE TERRACE  
City-St-Zip: HOMOSASSA, FL 34446

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: GUNNAR M ERICKSON

DST

01/17/2003

Electronic Signature of Signing Officer or Director

Date