NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000001232

1. Corporation Name

EAST CITRUS CIVITAN CLUB, INC.

| Principal Place of Business | Mailing Address | | | | |
|---|---|--|--|--|--|
| 1101 W BUTTONBUSH DRIVE BEVERLY HILLS FL 34465 | 1101 W BUTTONBUSH DRIVE BEVERLY HILLS FL 34465 | | | | |
| i I | | | | | |

FILED Feb 25, 1999 8:00 am Secretary of State

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| BEVERLY HILLS FL 34465 BEVERLY HILLS FL 34465 | | | | | | | | | | |
|--|--|----------------------------|--|----------|--|--|-----------------|-----------|--------------|------------|
| 2. Principal Place of | Business | 2a. Mailing Address | | | | 3. Date Incorporated or Qualifed | | | | |
| 21 | | 26 | | | | 03/02/1998 | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | 4. FEI Number Applied For | | | | 1 |
| 22 | | 77 | | | | 73-139 1178 | | No | . Applicable | 1 |
| City & State | | City & State | City & State | | | 5. Certificate of Status Desired | | | | -] |
| 23 | _ | 28 | | | | Fee Required | | | | |
| Zip | Country | Zip | ZipCountry | | | = 6 Election Campaign: Financing = = \$5.00 May Be = == | | | | |
| 24 | 25 | 29 | ······································ | | | Trust Fund Contribution Added to Fees | | | | |
| 9. 1 | lame and Address of Current F | Registered Agent | | 441 | | 10. Name and Address of New Reg | istered Agent | | | 1 |
| } | | | | 81 | Name | | | | | |
| PHILIPS, NEWTO | • | | | 82 | Street Addres | 8 (P.O. Box Number is Not Acceptable | 9) | | | 1 |
| 1101 W BUTTO | | | | 83 | | | _ | | | 1 |
| BEVERLY HILLS | FL 34485 | , - | ĺ | | | | | | |] |
| //e | with the let | 14 | | 84 | City | | FL 85 | Žip C | ode | |
| 11. Pursuant to the p | rovisions of Sections 617,0502 a | and 617-1508, Florida Stat | utes, the at | DOVE-1 | named corpora | ation submits this statement for the pu | | ino its r | registered | İ |
| Office or registere | d agent, or both, in the State of | Florida, Such change was | authorized | by th | e corporation | ation submits this statement for the pure specific statement of directors, I hereby accept the statement of directors and the statement of the | he appointmen | as reg | istered | |
| SIGNATURE/ | enta thell | în Ph | culzi | ~t | - | | 1-99. | | | |
| 12. | lyped or printed name of registered agent at | | TE: Registered . | Agent el | gnature required w | | DATE / | FOTO | OC IN 42 | 8 |
| TITLE | OFFICERS AND DIRECTORS | | | LE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | | | | | (11/98) |
| NAME | | 0.000.00 | 1.2 NA | | | esident O | 10. | go | Addition: | |
| STREET ADDRESS | | | | REET AL | | ewton Phillips | _ | | | CR2E037 |
| CITY-ST-ZIP | | | | Y-ST-Z | | 01 W Buttonbush | | | | 8 |
| TITLE | | DELETE 2.1 m | | | | everly Hills. Floresident Elect. D | rida 14 Mg | 465 | Addition | 뚱 |
| NAME | | | 2.2 NA | | _ | resident brece. p | | | | l |
| STREET ADDRESS | | | | | | Robert Iverson | | | | |
| CITY-ST-ZP | | | 1 | TY-87-2 | | O. Box 2015 | 34451 | | | l |
| TITLE | | ☐ DELETE | 3.1 1171 | | | <u>verness, Florida</u> | 1 <u>144</u> 21 | ange | Addition | l |
| NAME | | | 32 NA | | | easurer b ank Lewis - | _ | • | _ | l |
| STREET ADDRESS | | •- 4 | | - | | 75 S Big Al Point | t . | | | ١. |
| CITY-ST-ZIP | | | | ry-ST-Z | | verness, Florida | 34452 | 2 | | |
| TITLE | | ☐ DELETE | 4.1 TIT | | | cretary | 数 0 | iange - | Addition | <u> </u> - |
| NAME | | | 4.2 NA | ME | | ry King | | | | l |
| STREET ADDRESS | | | 4.3 STR | EET AD | | 9 Randolph Street | . | | | 1 |
| CITY-ST-ZIP | | | 4.4 CIT | Y-ST-ZT | | verness. Florida | 34453 | <u>_</u> | | i |
| TITLE | | ☐ DELETE | 5.1 TITL | | | | □a | | ☐ Addition | l |
| NAME | | | 5.2 NA | ME. | } | | | | } | J |
| STREET ADDRESS | | | 5.3 STR | EETAD | ORESS | | | | | |
| CITY-ST-ZIP | | | 5,4 CTN | /-ST-20 | ρ | _ | | _ | | |
| TITLE | | ☐ DELETE | 6.1 TTL | E | | | ch | ange | Addition | |
| NAME | • | | 6.2 NAV | Æ | | | | | 1 | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under ceth; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-2IP

SIGNATURE

THE BEQUIRED.

<u> 218199</u>

352-726-5601

Daytime Phone #