

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000004567

FILED
Sep 30, 2009
Secretary of State

Entity Name: CITRUS COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC.

Current Principal Place of Business:

28 NW HWY 19
CRYSTAL RIVER, FL 34428 US

New Principal Place of Business:

Current Mailing Address:

28 NW HWY 19
CRYSTAL RIVER, FL 34428 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

WELKER, RANDY
28 NW HWY 19
CRYSTAL RIVER, FL 34428 US

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: RANDY WELKER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: REYNOLDS, JACK
Address: 4325 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA SPRINGS, FL 34447

Title: P () Delete
Name: SIEFERT, JOHN
Address: 3810 S LECANTO HWY BLDG 2
City-St-Zip: LECANTO, FL 34461

Title: VP () Delete
Name: LAWTER, VERNON DR.
Address: 3800 S. LECANTO HWY.
City-St-Zip: LECANTO, FL 34461

Title: PE () Delete
Name: HARVEY, JAMES DR.
Address: 3800 S. LECANTO HWY.
City-St-Zip: LECANTO, FL 34461

Title: T () Delete
Name: TAYLOR, DON
Address: 15760 W. POWERLINE ST.
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: S () Delete
Name: SILVEY, PATTY
Address: P.O. BOX 156
City-St-Zip: BROOKSVILLE, FL 34605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PATTY SILVEY

S

09/30/2009

Electronic Signature of Signing Officer or Director

Date