


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90057 010 \*\*\*150.00

<b>DOCUMENT # P00000103100</b>	
1. Entity Name <b>CITIZENS BANCORP OF OVIEDO, INC.</b>	

Principal Place of Business <b>156 GENEVA DRIVE OVIEDO, FL 32765-7203</b>	Mailing Address <b>PO BOX 620729 OVIEDO, FL 32762-0729</b>
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40061667



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01032007 Chg-P CR2E034 (12/06)

4. FEI Number <b>59-3703405</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>LEE, RICHARD H 156 GENEVA DRIVE OVIEDO, FL 32765-7203</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLACKWOOD, BERNARD 381 MAPLE COURT OVIEDO, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>**SEE ATTACHED FOR COMPLETE LISTING**</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CONLEY, JOHNNIE W III 636 S. LAKE JESSUP AVENUE OVIEDO, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LEE, RICHARD H 1055 BRUMLEY ROAD CHULUOTA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LUKAS, JONATHAN S 100 LAKE MILLS ISLAND POINT CHULUOTA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARTIN, ROBERT G 395 OLD MIMS ROAD GENEVA, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VCFO DRUMMER, DON 169 EASTON CIRCLE OVIEDO, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input 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 607, 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: 	RICHARD H. LEE	4/10/07	407-365-6611
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>

ATTACHMENT

40061667  
# P00000103100

**CITIZENS BANCORP OF OVIEDO, INC.**

(COMPLETE LISTING)

**OFFICERS**

LEE, RICHARD	PRESIDENT/CEO	1055 BRUMLEY RD	CHULUOTA, FL.
VARGO, TERRY	VP	2796 GOLDENROD RD.	WINTER PARK, FL.
DRUMMER, DON	VP/CFO	169 EASTON CIR.	OVIEDO, FL
DUNMIRE, GLORIA	SECRETARY	2430 BLACKBERRY TR	OVIEDO, FL
TAYLOR, MARIE	TREASURER	2033 KELLY CREEK CIR	OVIEDO, FL
SLATTERY, TIM	VP	2060 WILLINGHAM	OVIEDO, FL

**DIRECTORS**

ONDICK, EDWARD	CHAIRMAN	89 GREENTREE DR.	WINTER PARK, FL.
LUKAS, JONATHAN		100 LAKE MILLS ISLAND PT	CHULUOTA, FL.
CONLEY, JOHNIE, III		636 S. LAKE JESSUP AVE.	OVIEDO, FL.
BLACKWOOD, BERNARD		381 MAPLE COURT	OVIEDO, FL.
		P.O. BOX 620852	
RICHARD H. LEE	PRESIDENT	1055 BRUMLEY ROAD	CHULUOTA, FL.
PENNIE M. OLLIFF	VICE CHAIRMAN	603 N. CENTRAL AVE.	OVIEDO, FL.
		P.O. BOX 620535	
ROBERT G. MARTIN		395 OLD MIMS ROAD	GENEVA, FL.
LOUIS P. TULP		4000 CURRYVILLE ROAD	CHULUOTA, FL
		P. O. BOX 621024	OVIEDO, FL.
DONALD JACOBS		2440 CURRYVILLE ROAD	CHULUOTA, FL.
ARTHUR F. EVANS		P.O. BOX 620460	OVIEDO, FL