


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # P02000037879 1. Entity Name CITRUS BAY SEARCH, INC.		
Principal Place of Business 8901 ELLIOTTS CT ORLANDO, FL 32836	Mailing Address 8901 ELLIOTTS CT ORLANDO, FL 32836	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CANAVESI, LAURA A 8901 ELLIOTTS CT ORLANDO, FL 32836		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ Signature, typed or printed name of registered agent and title if applicable.		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		05/02/06-80065-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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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: <u>Laura A. Canavesi</u> LAURA A. CANAVESI <u>4/17/06</u> <u>407-354-1432</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		



04172006 No Chg-P CR2E034 (11/05)

4. FEI Number
04-3627194

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required