## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000047819

Entity Name: LNZ OF CITRUS COUNTY, INC

FILED May 04, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:		
	RANDINGIRON SS, FL 34453	I WAY			
Current Mailing Address:			New Mailing Address:		
	RANDINGIRON SS, FL 34453	I WAY			
FEI Number	: 01-0673954	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:
1575 N. BF	ON, JESSICA RANDINGIRON SS, FL 34453				
	named entity s e of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered agent, or both,
SIGNATU	RE:				
0.0.0.		ic Signature of Registered Ag	ent		Date
		3(2)(b), F.S., the corporation did no	ot receive the prior notic	e.	
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () PATEL, BHADR 221 W LIBERT HERNANDO, FL	Y ST	Title: Name: Address: City-St-Zip:	DS ( PATEL, BHAE 221 W LIBER HERNANDO,	TY ST
Title: Name: Address: City-St-Zip:	DS () PATEL, PRITI S 221 W LIBERT HERNANDO, FL	Y ST	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	DP () HALVERSON, J 1575 N.BRAND INVERNESS, F	INGIRON WAY	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	DT () HALVERSON, J 1575 N.BRAND INVERNESS, FI	INGIRON WAY	Title: Name: Address: City-St-Zip:	(	) Change ()Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JESSICA ROSE HALVERSON DT 05/04/2009