## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000159186

Entity Name: CITRUS REAL ESTATE CORNER, INC.

FILED Feb 18, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

8914 E ECHO COURT 1118 N LOMBARDO AVE INVERNESS, FL 34450 LECANTO, FL 34461

Current Mailing Address: New Mailing Address:

8914 E ECHO COURT 1118 N LOMBARDO AVE INVERNESS, FL 34450 LECANTO, FL 34461

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIND, G. ROBERT

8914 E ECHO COURT

INVERNESS, FL 34450 US

HORTON, JUDY

1118 N LOMBARDO AVE
LECANTO, FL 34461 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: JUDY HORTON 02/18/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PRES (X) Change ( ) Addition Name: LIND, G. ROBERT Name: HORTON, JUDY

 Address:
 8914 E ECHO COURT
 Address:
 1118 N LOMBARDO AVE

 City-St-Zip:
 INVERNESS, FL 34450
 City-St-Zip:
 LECANTO, FL 34461

Title: SD () Delete Title: SEC (X) Change () Addition

 Name:
 STEFANSKI, GAIL
 Name:
 STEFANSKI, GAIL

 Address:
 8914 E ECHO COURT
 Address:
 2555 FOREST DR

 City-St-Zip:
 INVERNESS, FL 34450
 City-St-Zip:
 INVERNESS, FL 34450

Title: Title: ( ) Delete TRES (X) Change ( ) Addition HORTON, JUDY SARSFIELD-LIND, SUZANNE Name: Name: 1118 N LOMBARDO AVE 8914 E ECHO COURT Address: Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: INVERNESS, FL 34450

Title: VD (X) Delete Title: ( ) Change ( ) Addition

SARSFIELD LIND, SUZANNE Name:
8914 E ECHO COURT Address:
INVERNESS, FL 34450 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUDY HORTON PRES 02/18/2005