2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2007
Secretary of State

DOCUMENT# P06000015635

Entity Name: CITRUS FINANCIAL GROUP INC.

Current Principal Place of Business:

505 CAPRI BLVD.
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1505
INVERNESS, FL 34450

New Mailing Address:

FEI Number: 22-3921067 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

TOMCZAK, DAVID
505 CAPRI BLVD
TREASURE ISLAND, FL 33706 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: DAVID TOMCZAK 01/20/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: TOMCZAK, DAVID
Address: 505 CAPRI BLVD.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VTD ( ) Delete
Name: TOMCZAK, ANTHONY
Address: 505 CAPRI BLVD.
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DAVID TOMCZAK PRES 01/20/2007
Electronic Signature of Signing Officer or Director Date