

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 31 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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-06/02/95--01029--003
*****467.50 *****233.75

DOCUMENT # P93000015156 (1)

1. Corporate Name:

CITRUS GENERAL CONTRACTORS, INC.

Principal Place of Business

7122 HIAWASSEE OAKS
ORLANDO FL 32818

Mailing Address

7122 HIAWASSEE OAKS
ORLANDO FL 32818

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/01/1993	3a. Date of Last Report 03/25/1994
4. FEI Number 59-3170716	Applied Fee Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.012 Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21 3038 JOHN YOUNG PKWY Suite, Apt. #, etc. 22 SUITE 8 City & State 23 ORLANDO Zip 24 32804	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country 29 30
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9. Name and Address of Current Registered Agent

FRANCIS, O'NEIL
7122 HIAWASSEE OAKS DR.
ORLANDO FL 32818

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: To be printed below of registered agent and for fee application

Signature: Registered Agent signature required when resigning

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	☐ Change ☐ Addition
NAME	ONEILL, FRANCIS	1.2 NAME	
STREET ADDRESS	7122 HIAWASSEE OAKS DR.	1.3 STREET ADDRESS	
CITY, ST, ZIP	ORLANDO FL 32818	1.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE	VS	2.1 TITLE	☐ Change ☐ Addition
NAME	GREENIDGE, ERROL E	2.2 NAME	
STREET ADDRESS	12610 COUNTRY MOW CT	2.3 STREET ADDRESS	
CITY, ST, ZIP	ORLANDO FL 32828	2.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information submitted on this annual report or biennial 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 or liquidator of the corporation and that my signature is required by Chapter 202, Florida Statutes, and that my name appears in Block 1, 2, or Block 13 of this report or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Errol E. Greenidge Chief Operating Officer

3/19/95

407 241 8008