

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000106080

FILED
Feb 22, 2012
Secretary of State

Entity Name: COMMUNITY TAX STABILIZATION FUND, INC.

Current Principal Place of Business:

4705 WEST US HWY 90
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2029
LAKE CITY, FL 32056

New Mailing Address:

4705 WEST US HWY 90
LAKE CITY, FL 32055

FEI Number: 59-3563700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIBFRIED, KEITH C
4705 WEST US HWY 90
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: LEIBFRIED, KEITH C
Address: 4705 WEST US HWY 90
City-St-Zip: LAKE CITY, FL 32055 US

Title: D
Name: MOSES, PHILIP J JR
Address: 383 SW SWEETBREEZE DR
City-St-Zip: LAKE CITY, FL 32024 US

Title: D
Name: SMITH, STEPHEN A
Address: PO BOX 1792
City-St-Zip: LAKE CITY, FL 32056 US

Title: D
Name: MCGRANAHAN, ROBERT
Address: 10709 184TH STREET
City-St-Zip: MC ALPIN, FL 32062 US

Title: D
Name: POOLE, RONNIE
Address: 9024 141ST DRIVE
City-St-Zip: LIVE OAK, FL 32060 US

Title: EVP
Name: BREWER, DAVID
Address: 4705 W US HWY 90
City-St-Zip: LAKE CITY, FL 32055

I hereby 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 all other like empowered.

SIGNATURE: DAVID BREWER

EVP

02/22/2012

Electronic Signature of Signing Officer or Director

Date