

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097838

Entity Name: DNL OF CITRUS, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

1801 NW HWY 19
STE 509
CRYSTAL RIVER, FL 34428

New Principal Place of Business:

Current Mailing Address:

721 N. COUNTRY CLUB DR.
CRYSTAL RIVER, FL 34428

New Mailing Address:

FEI Number: 65-0961691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULVIE, SHARON
2131 N.W. 16 ST
CRYSTAL RIVER, FL 34428 US

Name and Address of New Registered Agent:

LAMBO, DAVID
721 N COUNTRY CLUB DR.
CRYSTAL RIVER, FL 34429 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 J LAMBO

04/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: LAMBO, LINDA
Address: 721 N COUNTRY CLUB DR
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VP () Delete
Name: LAMBO, DAVID J
Address: 721 N COUNTRY CLUB DR
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: T () Delete
Name: MULVIE, SHARON
Address: 2131 N.W. 16 ST
City-St-Zip: CRYSTAL RIVER, FL 34428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 J LAMBO

VP

04/02/2009

Electronic Signature of Signing Officer or Director

Date