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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JAN 19 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # S87477

1. Corporation Name

CITRUS COUNTY SERVICE CORP.

Principal Place of Business

LEGAL DIVISION
225 WATER ST.
JACKSONVILLE FL 32202
US

Mailing Address

LEGAL DIVISION
225 WATER ST.
JACKSONVILLE FL 32202
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1991

4. FEI Number

65-0310219

Applied For

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 owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

1201 HAYS ST. STE 105

City & State

Tallahassee FL

Zip

32301

Country

USA

2a. Mailing Address

26

Legal Division

Suite, Apt. #, etc.

301 S. College St.

City & State

Charlotte NC

Zip

28288

Country

USA

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301-4

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Troy Todd

1-18-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S ☒ DELETE

NAME MILLER, JERRY M. JR.

STREET ADDRESS 301 S. COLLEGE ST.

CITY-ST-ZIP CHARLOTTE NC

TITLE D ☒ DELETE

NAME HODNETT, BRYON E

STREET ADDRESS 225 WATER ST.

CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☒ DELETE

NAME MITCHELL, JOHN A. III

STREET ADDRESS 225 WATER ST.

CITY-ST-ZIP JACKSONVILLE FL

TITLE D ☒ DELETE

NAME WERTZ, LARRY J.

STREET ADDRESS 225 WATER ST.

CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE S ☒ Change ☐ Addition

1.2 NAME Keith D. Lembo

1.3 STREET ADDRESS 301 S. College St.

1.4 CITY-ST-ZIP Charlotte, NC 28288

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Marion A. Cowell, Jr.

2.3 STREET ADDRESS 301 S. College St.

2.4 CITY-ST-ZIP Charlotte, NC 28288

3.1 TITLE D ☒ Change ☐ Addition

3.2 NAME Edward E. Crutchfield

3.3 STREET ADDRESS 301 S. College St.

3.4 CITY-ST-ZIP Charlotte, NC 28288

4.1 TITLE D ☒ Change ☐ Addition

4.2 NAME John R. Georgius

4.3 STREET ADDRESS 301 S. College St.

4.4 CITY-ST-ZIP Charlotte, NC 28288

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/99

704-374-6611

CR2E034 (11/98)

②



ACCOUNT NO. : 072100000032

REFERENCE : 102302 167868A

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 150.00

ORDER DATE : January 18, 1999

ORDER TIME : 9:54 AM

ORDER NO. : 102302-005

CUSTOMER NO: 167868A

CUSTOMER: Lisa P. Clontz, Legal Asst
First Union Corporation
One First Union Ctr
Legal Dept. - 31st Floor
Charlotte, NC 28288

ANNUAL REPORT FILING

NAME: CITRUS COUNTY SERVICE CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janice Vanderslice

EXAMINER'S INITIALS: _____

99 JAN 19 AM 10:40

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