


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

00325

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V31973					
1. Corporation Name CITRUS COUNTY LAND CORP.					

FILED

99 JAN 19 AM 11:21

SECRETARY OF STATE

TALLAHASSEE, FLORIDA



Principal Place of Business LEGAL DIVISION 225 WATER ST. JACKSONVILLE FL 32202 US	Mailing Address LEGAL DIVISION 225 WATER ST. JACKSONVILLE FL 32202 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 301 Hays St., Ste 105	Suite, Apt. #, etc. 301 S. College St.
City & State 23 Tallahassee FL	City & State 28 Charlotte, NC
Zip 24 32301	Zip 29 28288
Country 25 USA	Country 30 USA

3. Date Incorporated or Qualified 04/22/1992	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 65-0334916	Additional Fee Required \$8.75
5. Certificate of Status Desired <input type="checkbox"/>	May Be Added to Fees \$5.00
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent 3 THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	
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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 DATE 1-18-99	
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12. OFFICERS AND DIRECTORS	
TITLE S	<input checked="" type="checkbox"/> DELETE
NAME MILLER, JERRY M. JR	
STREET ADDRESS 301 S. COLLEGE ST.	
CITY-ST-ZIP CHARLOTTE NC	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME HODNETT, BRYON E	
STREET ADDRESS 225 WATER ST.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME MITCHELL, JOHN A. III	
STREET ADDRESS 225 WATER ST.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME WERTZ, LARRY J.	
STREET ADDRESS 225 WATER ST.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 the empowered.	
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SIGNATURE: SIGNATURE	DATE: 1/14/99	DAYTIME PHONE #: 704-374-6611
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CR2E034 (11/98)

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ACCOUNT NO. : 072100000032

REFERENCE : 102302 167868A

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 150.00

ORDER DATE : January 18, 1999

ORDER TIME : 9:56 AM

ORDER NO. : 102302-010

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 LAND 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: _____
DIVISION OF CORPORATION

99 JAN 19 AM 10:40

RECEIVED