

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008668

FILED  
May 03, 2010  
Secretary of State

**Entity Name:** CITRUS COUNTY CHILDREN'S ADVOCACY CENTER, INC.

**Current Principal Place of Business:**

7655 WEST GULF TO LAKE HIGHWAY  
SUITE 12  
CRYSTAL RIVER, FL 34429

**New Principal Place of Business:**

4465 N LECANTO HWY  
BEVERLY HILLS, FL 34465

**Current Mailing Address:**

7655 WEST GULF TO LAKE HIGHWAY  
SUITE 12  
CRYSTAL RIVER, FL 34429

**New Mailing Address:**

**FEI Number:** 20-5494335      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MORING, JACK A  
7655 WEST GULF TO LAKE HIGHWAY  
SUITE 12  
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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P D  
Name: DAWSEY, JEFF  
Address: 1 DR MARTIN LUTHER KING JR AVE  
City-St-Zip: INVERNESS, FL 34450

Title: VP D  
Name: GUINN, PORTIA  
Address: 1 DR MARTIN LUTHER KING JR AVE  
City-St-Zip: INVERNESS, FL 34450

Title: ST D  
Name: BOWERMASTER, MELISSA  
Address: 4465 N. LECANTO HWY  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D  
Name: KANE, ELEANOR  
Address: 4465 N LECANTO HWY  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D  
Name: SCHENCK, KEITH M  
Address: 110 N APOPKA AVENUE  
City-St-Zip: INVERNESS, FL 34450

Title: D  
Name: STEWART, TERRI  
Address: 110 N. APOPKA AVENUE  
City-St-Zip: INVERNESS, FL 34450

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PORTIA GUINN

VP

05/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date