2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745226

Entity Name: THE HUMANE SOCIETY OF CITRUS COUNTY, FLORIDA, INC.

FILED
Jan 20, 2022
Secretary of State
4111002808CC

Current Principal Place of Business:

751 S SMITH AVE INVERNESS, FL 34451

Current Mailing Address:

P.O. BOX 2283

INVERNESS, FL 34451 US

FEI Number: 59-1932704 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBSON, MELISSA 10822 S. DARCEY PATH FLORAL CITY, FL 34436 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

Officer/Director Detail:

Title P Title VP

NameJACOBSON, MELISSANameCURTIS, KARRONAddress10822 S DARCEY PATHAddress9132 S KIMBERLY CIRCity-State-Zip:FLORAL CITY FL 34436City-State-Zip:FLORAL CITY FL 34436

Title D Title S

Name LINDSKOG, BETTY Name SMITH, KIM

Address 751 S SMITH AVE Address 3620 S DIAMOND AVE
City-State-Zip: INVERNESS FL 34451 City-State-Zip: INVERNESS FL 34452

Title D Title 1

NameJACOBSON, JAMESNameANDRIAN, BONNIEAddress10822 S DARCEY PATHAddress10821 S DARCEY PATHCity-State-Zip:FLORAL CITY FL 34436City-State-Zip:FLORAL CITY FL 34436

City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR

Name TRUMP, CATHERINE A
Address 10739 E IRENE ST
City-State-Zip: INVERNESS FL 34450

above, or on an attachment with all other like empowered.

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

SIGNATURE: BONNIE ANDRIAN TREASURER 01/20/2022

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

Electronic Signature of Signing Officer/Director Detail

Date