2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765543

Entity Name: CITRUS WATERCOLOR SOCIETY, INC.

FILED Feb 03, 2025 Secretary of State 3273003741CC

Current Principal Place of Business:

ART CENTER OF CITRUS COUNTY 2644 N ANNAPOLIS AVENUE HERNANDO, FL 34442

Current Mailing Address:

P O BOX 2464

INVERNESS, FL 34451-2464 US

FEI Number: 59-2946213 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROLY, AILEEN 4172 N CANDLEWOOD DRIVE BEVERLY HILLS, FL 34465 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: AILEEN CROLY 02/03/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY Title 1VP

Name NEWMAN, DEBORAH Name MCGEARY, SIGNIAN

Address P O BOX 2464 Address P O BOX 2464

City-State-Zip: INVERNESS FL 34451-2464 City-State-Zip: INVERNESS FL 34451-2464

TitleTREASURERTitleDIRECTOR AMBASSADORNameCROLY, AILEENNameMCMURRAY, ANGELA

Address P O BOX 2464 Address P O BOX 2464

City-State-Zip: INVERNESS FL 34451-2464 City-State-Zip: INVERNESS FL 34451-2464

TitlePRESIDENTTitle2VP MEMBERSHIPNameSULLIVAN, DORENDANameKUUKARI, JANAddressP O BOX 2464AddressP O BOX 2464

City-State-Zip: INVERNESS FL 34451-2464 City-State-Zip: INVERNESS FL 34451-2464

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: AILEEN CROLY TREASURER