

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008668

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

**Current Principal Place of Business:**

1410 S LECANTO HWY  
LECANTO, FL 34461

**Current Mailing Address:**

1410 S LECANTO HWY  
LECANTO, FL 34461 US

**FEI Number: 20-5494335**

**Certificate of Status Desired: No**

**Name and Address of Current 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

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT  
Name           LEE, SCOTT  
Address        C/O EDWARD JONES  
                  103 S US HWY 41  
City-State-Zip: INVERNESS FL 34450

Title           OTHER, EXECUTIVE DIRECTOR  
Name           BOWERMASTER, MELISSA  
Address        1410 S. LECANTO HIGHWAY  
City-State-Zip: LECANTO FL 34461

Title           DIRECTOR  
Name           MARRIAGE, GARY  
Address        839 NE US HWY 19  
City-State-Zip: CRYSTAL RIVER FL 34429

Title           DIRECTOR  
Name           KELLOW, NANCY  
Address        5945 N OAKMONT DRIVE  
City-State-Zip: BEVERLY HILLS FL 34465

Title           DIRECTOR  
Name           CHUCKMAN, LINDA  
Address        9428 E SOUTHGATE DRIVE  
City-State-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: MELISSA BOWERMASTER**

**EXECUTIVE DIRECTOR**

**04/05/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date