## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N1400000415

Entity Name: SNIPPET CITRUS, INC.

### Current Principal Place of Business:

14 LAURELCHERRY CT HOMOSASSA, FL 34446

## **Current Mailing Address:**

14 LAURELCHERRY CT HOMOSASSA, FL 34446

# FEI Number: 46-1924959

### Name and Address of Current Registered Agent:

JOHNSON, MARY LEE 14 LAURELCHERRY COURT HOMOSASSA, FL 34446 US FILED Mar 15, 2017 Secretary of State CC0259915403

Date

Certificate of Status Desired: Yes

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

# Officer/Director Detail :

Title	P	Title	TREASURER
Name	JOHNSON, MARY LEE	Name	FRISBIE, KATHY
Address	14 LAURELCHERRY COURT	Address	3 SYCAMORE CIRCLE
City-State-Zip:	HOMASASSA FL 34446	City-State-Zip:	HOMOSASSA FL 34446
		<b></b>	DIDECTOR
Title	SECRETARY	Title	DIRECTOR
Name	HART-LAMERY, B PAT	Name	BAUMAN, MARY ALICE
Address	1568 N. FANNING PT.	Address	3256 W. CASTLE PINES LOOP
City-State-Zip:	INVERNESS FL 34453	City-State-Zip:	LECANTO FL 34461
Title	DIRECTOR		
Name	PERRY, ANITA		
Address	9 LONGLEAF CT.		
City-State-Zip:	HOMOSASSA FL 34446		

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: MARY LEE JOHNSON

PRESIDENT

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date