

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000000662

Entity Name: ALTRUSA INTERNATIONAL FOUNDATION OF CITRUS COUNTY, INC.**Current Principal Place of Business:**3600 E. GULF TO LAKE HWY
INVERNESS, FL 34453**Current Mailing Address:**P.O. BOX 2825
INVERNESS, FL 34451 US**FEI Number: 47-5206969****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PHILLIPS, TRACI
3600 E. GULF TO LAKE HWY
INVERNESS, FL 34453 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: TRACI PHILLIPS

01/23/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	SUTHERLAND, MELISSA
Address	P.O. BOX 2825
City-State-Zip:	INVERNESS FL 34451

Title	PRESIDENT ELECT
Name	BLAIR, LINDSAY
Address	PO BOX 2825
City-State-Zip:	INVERNESS FL 34451

Title	PRESIDENT
Name	PHILLIPS, TRACI
Address	P.O. BOX 2825
City-State-Zip:	INVERNESS FL 34451

Title	VP
Name	LANTHIER, SARAH
Address	3504 N VONNEGUT POINT
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DIRECTOR
Name	GILL, SUSAN
Address	P.O. BOX 2825
City-State-Zip:	INVERNESS FL 34451

Title	DIRECTOR
Name	MCCARTHY, LINDA
Address	P.O. BOX 2825
City-State-Zip:	INVERNESS FL 34451

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: TRACI PHILLIPS

PRESIDENT

01/23/2023

Electronic Signature of Signing Officer/Director Detail

Date