2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2015
Secretary of State
CC9791875738

DOCUMENT# N16654

Entity Name: CITRUS COUNTY FAMILY RESOURCE CENTER, INC.

Current Principal Place of Business:

C/O GINGER WEST
2435 N FLORIDA AVE
HERNANDO, FL 34442

Current Mailing Address:

C/O GINGER WEST
2435 N FLORIDA AVE
HERNANDO, FL 34442

FEI Number: 59-2998366

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WEST, GINGER(VIRGINI LMRS.
3595 E DIANA LN
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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VPD
Name	WEST, VIRGINIA"GING LMRS
Address	3595 E DIANA LN
City-State-Zip:	INVERNESS FL 34453

Title	D
Name	FITTERMAN, SHEARA
Address	301 S SEMINOLE AVE.
City-State-Zip:	INVERNESS FL 34452

Title	D
Name	WALDERMAR, RICK
Address	PO BOX 2456
City-State-Zip:	INVERNESS FL 34450

Title	TREASURER
Name	FLOYD, MARY K
Address	2745 EAST DAWSON
City-State-Zip:	INVERNESS FL 34453

Title	S
Name	CLEARY, MICHELLE MRS
Address	1782 E CLEVELAND ST
City-State-Zip:	HERNANDO FL 34442

Title	P
Name	LEMIRE, NURIS
Address	5270 W FIELD STREET
City-State-Zip:	HOMOSASSA FL 34446

Title	D
Name	CLARK, DEBORAH
Address	9856 W ARMS DR D1
City-State-Zip:	CRYSTAL RIVER FL 34429

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: VIRGINIA "GINGER" L WEST VPD 02/03/2015

Electronic Signature of Signing Officer/Director Detail — Date