2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16654

Entity Name: CITRUS COUNTY FAMILY RESOURCE CENTER, INC.

FILED Feb 05, 2014 Secretary of State CC0510032137

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 Title S

NameWEST, VIRGINIA"GING LMRSNameCLEARY, MICHELLE MRSAddress3595 E DIANA LNAddress1782 E CLEVELAND STCity-State-Zip:INVERNESS FL 34453City-State-Zip: HERNANDO FL 34442

Title D Title P

Name LANE, SHEARA Name LEMIRE, NURIS

Address 301 S SEMINOLE AVE. Address 5270 W FIELD STREET

City-State-Zip: INVERNESS FL 34452 City-State-Zip: HOMOSASSA FL 34446

Title D Title D

NameWALDERMAR, RICKNameCLARK, DEBORAHAddressPO BOX 2456Address9856 W ARMS DR D1

City-State-Zip: INVERNESS FL 34450 City-State-Zip: CRYSTAL RIVER FL 34429

Title TREASURER

Name FLOYD, MARY K

Address 2745 EAST DAWSON

City-State-Zip: INVERNESS FL 34453

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: WEST, VIRGINIA"GING LMRS VP-DIRECTOR 02/05/2014