## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L04375

Entity Name: SWEETWATER HOMES OF CITRUS, INC.

## Current Principal Place of Business:

8016 S SUNCOAST BLVD HOMOSASSA, FL 34446

# **Current Mailing Address:**

8016 S SUNCOAST BLVD HOMOSASSA, FL 34446

# FEI Number: 59-2957488

#### Name and Address of Current Registered Agent:

BARTLE, SHERYL L 8016 S SUNCOAST BLVD HOMOSASSA, FL 34446 US Certificate of Status Desired: No

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	SHERYL L BARTLE			04/12/2023
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	CEO	Title	VP	
Name	PONTICOS, STEPHAN E	Name	TATE, LARRY	
Address	7 BYRSONIMA CT WEST	Address	11 BYRSONIMA CT WEST	
City-State-Zip:	HOMOSASSA FL 34446	City-State-Zip:	HOMOSASSA FL 34446	
Title	DIRECTOR	Title	PRESIDENT	
Name	BRUNSINK, WAYNE	Name	CHRISTENSEN, ROBERT S	
Address	14 CHINKAPIN CIRCLE	Address	2 ELDER COURT E	
City-State-Zip:	HOMOSASSA FL 34446	City-State-Zip:	HOMOSASSA FL 34446	
Title	DIRECTOR	Title	DIRECTOR	
Name	MAUGHAN, NELSON	Name	JACOBY, JAMES JAY	
Address	44 CYPRESS BLVD WEST	Address	P O BOX 1680	
City-State-Zip:	HOMOSASSA FL 34446	City-State-Zip:	CRYSTAL RIVER FL 34423	
Title	TREASURER	Title	SECRETARY	
Name	AUSTIN, TERRY V	Name	BARTLE, SHERYL L	
Address	3831 CATBIRD PT	Address	5515 N ROSEDALE CIR	
City-State-Zip:	CRYSTAL RIVER FL 34428	City-State-Zip:	BEVERLY HILLS FL 34465	

#### Continues on page 2

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERYL L BARTLE

SECRETARY

04/12/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 12, 2023 Secretary of State 6025123285CC

## **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	PHANEUF, ROBERT N
Address	4524 CHEVAL BLVD
City-State-Zip:	LUTZ FL 33558