

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51033

**FILED**  
**Feb 07, 2024**  
**Secretary of State**  
**0891878036CC**

**Entity Name:** HABITAT FOR HUMANITY OF CITRUS COUNTY INC.

**Current Principal Place of Business:**

7768 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429

**Current Mailing Address:**

P.O. BOX 1041  
CRYSTAL RIVER, FL 34423 US

**FEI Number:** 59-3136342

**Certificate of Status Desired:** No

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

ABBOTT, GLEN C  
9030 W. FORT ISLAND TRAIL  
STE 11B  
CRYSTAL RIVER, FL 34429 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 CEO, PRESIDENT  
Name RUSAW, ERNEST G  
Address 3045 N PINELAKE VILLAGE PT.  
City-State-Zip: LECANTO FL 34461

Title SECRETARY  
Name DALY, LINDA  
Address 3334 W PEBBLE BEACH CT  
City-State-Zip: LECANTO FL 34461

Title DIRECTOR  
Name HOOPER, DWIGHT  
Address 501 W MAIN ST.  
City-State-Zip: INVERNESS FL 34450

Title DIRECTOR  
Name CASPER, MARK  
Address 1248 N ESSEX AVE  
City-State-Zip: CITRUS HILLS FL 34442

Title DIRECTOR  
Name LOCKE, DAVID  
Address 4130 S WILLIAM AVE  
City-State-Zip: INVERNESS FL 34452

Title COO  
Name LEECH, JUSTIN  
Address 5 SPRUCE PINE CT. NORTH  
City-State-Zip: HOMOSASSA FL 34446

Title TREASURER  
Name COLE, JOSEPH  
Address 5407 N ROSEDALE CIRCLE  
City-State-Zip: BEVERLY HILLS FL 34465

Title CHAIRPERSON  
Name DALY, RONALD  
Address 1183 W BEAGLE RUN LOOP  
City-State-Zip: HERNANDO FL 34442

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

**SIGNATURE:** TRUDI PATUZZI

**CHIEF ADMINISTRATIVE OFFICER**      **02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VICE CHAIRPERSON  
Name HILSDON, STEVEN  
Address 10948 N RIVER RANCH PATH  
City-State-Zip: CRYSTAL RIVER FL 34428

Title DIRECTOR AT LARGE  
Name ELIZABETH, ORSAY  
Address 10932 N RIVER RANCH PATH  
City-State-Zip: CRYSTAL RIVER FL 34428

Title DIRECTOR  
Name POWERS, LINDA  
Address 1902 KIMBERLY LANE  
City-State-Zip: INVERNESS FL 34452

Title ADVISORY BOARD  
Name PETERSON, NORMAN  
Address 9132 E SWEETWATER  
City-State-Zip: INVERNESS FL 34450

Title CAO  
Name PATUZZI, TRUDI  
Address 5600 SW 183RD TERRACE  
City-State-Zip: DUNNELLON FL 34432

Title 2ND VICE CHAIRPERSON  
Name JOSEPH, BASSETT  
Address 8727 E ORANGE AVE.  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name DEFELICE, CHRISTOPHER  
Address 45981 E BOTONY CT.  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name NAUGLE, RYAN  
Address 3940 E SHOREWOOD DR.  
City-State-Zip: HERNANDO FL 34442

Title ADVISORY BOARD  
Name CLARK, CINDY  
Address 2895 W LIVE OAK ST.  
City-State-Zip: LECANTO FL 34461