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May 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **709922** **(9)**

1. Corporation Name
OZELLO CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
14095 W OZELLO TR CRYSTAL RIVER FL 34429 US	14095 W OZELLO TR CRYSTAL RIVER FL 34429 US

3. Date Incorporated or Qualified: 11/15/1965

4. FEI Number: 59-2945820 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☑ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

HENDERSON, THELMA
2223 S. HUNT POINT
CRYSTAL RIVER FL 34429

10. Name and Address of New Registered Agent

81 Name: VAN GELDER, MARJORIE
82 Street Address (P.O. Box Number is Not Acceptable): 5800 S. OAKRIDGE DR.
83: HOMOSASSA SPRINGS, FL 34447
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Marjorie VanGelder — Marjorie VanGelder — 5/19/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	VEEDER, ROBERT		1.2 NAME		
STREET ADDRESS	3460 W SUSAN LN		1.3 STREET ADDRESS		
CITY-ST-ZIP	LECANTO FL		1.4 CITY-ST-ZIP	34461	
TITLE	SD	☐ DELETE	2.1 TITLE	SD	☑ Change ☐ Addition
NAME	BENSON, SARA		2.2 NAME	BENSON, CARL	
STREET ADDRESS	1517 S FISHCREEK PT		2.3 STREET ADDRESS	1517 S FISHCREEK PT	
CITY-ST-ZIP	CRYSTAL RIVER FL		2.4 CITY-ST-ZIP	CRYSTAL RIVER, FL 34429	
TITLE	D	☐ DELETE	3.1 TITLE	D	☑ Change ☐ Addition
NAME	HENDERSON, THELMA		3.2 NAME	JOAN DuBOSK	
STREET ADDRESS	2223 S. HUNT POINT		3.3 STREET ADDRESS	1150 STRAY OAK TERRACE	
CITY-ST-ZIP	CRYSTAL RIVER FL		3.4 CITY-ST-ZIP	CRYSTAL RIVER, FL 34429	
TITLE	PD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	RIPPEY, DONALD		4.2 NAME		
STREET ADDRESS	578 N. LAKE CIRCLE		4.3 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL 34429		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HAYDEN, FRANCIS		5.2 NAME		
STREET ADDRESS	14415 W EBBTIDE CT		5.3 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL		5.4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	VAN GELDER, MARJORIE		6.2 NAME		
STREET ADDRESS	5800 S. OAKRIDGE DR.		6.3 STREET ADDRESS		
CITY-ST-ZIP	HOMOSASSA SPRINGS FL 34447		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: TD — 5/15/98 — (561) 527-8036