4-9-97 B-4308 NX FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

755055

(1)

HILLSBOROUGH COUNTY AGRICULTURAL POLITICAL ACTIO N COMMITTEE, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

ACTION COMMITTEE. INC. 100 \$ MULRENNAN ROAD VALRICO FL 33594-3933

Suite, Apt. #, etc.

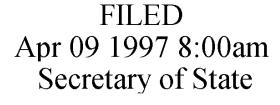
City & State

ACTION COMMITTEE, INC. 100 S MULRENNAN ROAD VALRICO FL 33594-3934

Suite, Apl. #, etc.

2a. Mailing Address

City & State



3a. Date of Last Report 05/01/1996

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

3. Date Incorporated or Qualified 11/07/1980

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number 59-2079401

3		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for			s. 199.032,
24	25	29	30]					No No	
	9. Name and Address of Current	Registered Agent		T		10. Name and Address of New Re	gistered A	gent	·
			[B1	Name				
CARLTON, DENNIS				82	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		
100 S. MULRENNAN RD.				_					
VALRICO	OFL 33594-3933		į į	B3					
1			- t	84	City			85 Zip	Code
3			,		<u> </u>		FL		
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State of	l Florida. Such change was	authorized	t by tl	named corpo	oration submits this statement for the p on's board of directors. Thereby acces	ourpose of	changing	its registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 617.0503, F	torida Stat	ules.	10 00 polain	·	or the appe		io , e giotoroa
SIGNATURE .									
	Signature, typed or printed name of registered agent		TE: Registered	I Agent	signature require	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE TEDE AND	DIBEOTO	ADC IN 40
12.	PD OFFICERS AND	OFFICERS AND DIRECTORS Delete		1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ENS AND	Change	
NAME	CARLTON, DENNIS	_ DEFET						Unango	, LI Addition
STREET ADDRESS	100 S. MULRENNAN RD.			1.2 NAME 1.3 STREET ADDRESS					
• • • • • • • • • • • • • • • • • • • •	VALRICO FL 33594								
CITY-ST-ZIP	VPD	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition
NAME	O'HARA, RON		2.2 NA		}		•		Notition
STREET ADDRESS	131333 LEWIS GALLAGHER RE	a en		2.3 STREET ADDRESS				•	
CITY-ST-ZIP	DOVER FL 33527	'		2 4 CITY-ST-ZIP					
TITLE	TD	DELETE	3.1 717		ZIF			Change	Addition
NAME	HARKALA, WALTER	 .	3.2 NA		Ì				
STREET ADDRESS	1211 W. MCGEE RD.			REET AD	ORESS				
CITY-ST-ZIP	PLANT CITY FL 33565		1	TY-S1-	<u> </u>				
TITLE	SD	DELETE	4.1 T/T					Change	Addition
NAME	HINTON, JEMY	_	4. 2 NA	VME					
STREET ADDRESS	1610 N. TAYLOR RD.		4.3 STI	REET AD	DRESS				
CITY-ST-ZIP	BRANDON FL 33510-2180			Y-S1-	i i				
TITLE		DELETE	5.1 TIT	$\overline{}$			·	Change	Addition
NAME			5.2 NA	ME					i
STREET ADDRESS			5.3 STI	REET AD	DRESS				
CITY-ST-ZIP	•		5.4 CIT	Y-ST-2	MP				l
TITLE		☐ DELETE	6.1 TiT				[Change	☐ Addilion
NAME			6.2 NA	ME					
STREET ADDRESS			63511	AEET AD	DRESS				
CITY ST. ZIP			6.4 CIT	Y-ST-2	TIP .				
14. 1 do heret informatio 1 am an of	by certify that the information supplied on Indicated on this annual report or supplied or director of the corporation or the Diock 12 or Block 13 if changed, or control of the corporation of the Diock 12 or Block 13 if changed, or control of the Diock 12 or Block 13 if changed, or control of the Diock 13 if changed.	oplemental annual report is e receiver or trustee empoy	true and a wered to ex	CCUra	te and that r	my signature shall have the same lega	Leffect as i	f made u	nder oath: that l