FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Jan 22 1998 8:00am Secretary of State

OUNCIL-PASCO INC.							
Principal Place of Business Mailing Address		Mailing Address				-	
7944 GRAND BLVD. P.O. BOX 253 ENTIRE BLDG PORT RICHEY FL 34673-0 PORT RICHEY FL 34668 US		:53			3. Date Incorporated or Qualified 02/25/1986 4. FEI Number Applied For		
US						59-2905349 Not Applicable	
		2a. Mailing Address	ailing Address			5. Certificate of Status Desired S8.75 Additional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Fee Required	
22		27				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & Stat	е	City & State				7. Is this nonprofit corporation a homeowners association?	
23		28				Yes X No	
Zip 24	Country	Zip	Coun			8. This corporation owes or has paid the current year Intangible	
24	9. Name and Address of Currer	29 nt Registered Agent	30	ı		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
				81	Name	10, 142o and Addition of Holl Hogistered Agent	
BIRMINGHAM, JOHN M.				82	Otro and Antolina	(D.O. D., N L L. N L L. N L L.	
	COGNAC DR			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
NEW PORT RICHEY FL 34653				83			
				84	City	■■ 85 Zip Code	
11 Pursuant to the provisions of Sections 617 0502 and 617 1508 Florida Statutes the shows person outputs this statement for the purpose of showing the excitation.							
office or r	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 _							
	Signature, typed or printed name of registered ago		; Registered	d Age	nt signature required		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	PD DENING	☐ DELETE	1.1 711			L Change L Addition	
STREET ADDRESS	HOLT, DENNIS 23647 WOODGLEN AVE		1.2 NA		4000000		
CITY-ST-ZIP	LAND O'LAKES FL		1.4 CI		ADDRESS		
TITLE	PD	☐ DELETE	2.1 Til		1-212	Change Addition	
NAME	BIRMINGHAM, JOHN M.		2.2 NA		İ		
STREET ADDRESS	7025-1 COGNAC DR		2.3 ST	REET /	ADDRESS		
CITY-ST-ZIP	NEW PORT RICHEY FL		2. 4 C	TY-S	T-ZIP		
TITLE	TD	DELETE	3.1 TIT	LE .		Change Addition	
NAME	LONIGAN, LARRY		3.2 NA	ME			
STREET ADDRESS	4234 REVERE CIR	EVERE CIR 3.3 S		REET A	ADDRESS	}	
CITY-ST-ZIP	NEW PORT RICHEY FL		3.4. Ci	TY-SI	T-ZIP		
TITLE	SD	☐ DELETE	4.1 Til	ĽE	1	☐ Change ☐ Addition	
NAME	PIVETTE, ROBERT		4. 2 N/	AME			
STREET ADDRESS	4823 BOONESBORO CT		4.3 ST	REET A	ADDRESS		
CITY-ST-ZIP	NEW PORT RICHEY FL		4.4 CIT		-ZiP		
TITLE		DELETE	5.1 TIT			☐ Change ☐ Addition	
NAME			5.2 NA				
STREET ADDRESS				5.3 STREET ADDRESS		-	
CITY-ST-ZIP		☐ DELETE	5.4 CIT		- ZIP	Ob Ladam	
TITLE		ויין מפנינונ	6.1 TIT			☐ Change ☐ Addition	
NAME STREET ADDRESS			6.2 NA		ADDOCCC		
STREET ADORESS			1		ODRESS		
14. I hereby o	ertify that the information supplied wi	th this filing does not qualify for	6,4 CIT the exe			ection 119.07(3)(i), Florida Statutes. I further certify that the information	

indicated on this annual report or supplied with this filling does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes, Flurther certify that the informatic indicated on this annual report or suppliemental 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: