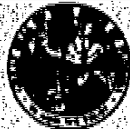


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:52

DOCUMENT # N14029 (5)

1. Corporation Name

NEW PORT RICHEY COMMUNITY COOPERATIVE, INC.

Principal Place of Business

Mailing Address

5919 MAIN ST.
NEW PORT RICHEY FL 34652
US

P.O. BOX 622
NEW PORT RICHEY FL 34656
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2684075

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 **New Port Richey**

26 Suite, Apt. #, etc.

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

10. Name and Address of New Registered Agent

DAVID P. SCHRADER
2211 U. S. HWY 19
HOLIDAY FL 34690

81 Name

rva

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
VP	KINNUNEN, DR NILES	5801 MAIN ST NEW PT RICHEY FL	
	SYRASKI, DAVID	2334 US HWY 19 HOLIDAY FL	
	REES, JOAN	5242 MAIN ST NEW PT RICHEY FL	
	SCHRADER, DAVID	2211 US HWY 19 HOLIDAY FL	
	HERIG, JOHN	5731 MAIN ST NEW PORT RICHEY FL	
	MAUTZ, TINA M	5919 MAIN ST NEW PT RICHEY FL	

Please
see enclosed
list of
new officers
and directors

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
1.1 TITLE	President		
1.2 NAME	Marc W. Bowman		
1.3 STREET ADDRESS	6128 U.S. Highway 19		
1.4 CITY-ST-ZIP	New Port Richey, Florida 34652		
2.1 TITLE	Vice President		
2.2 NAME	Scott Chittum		
2.3 STREET ADDRESS	7000 U.S. Highway 19		
2.4 CITY-ST-ZIP	New Port Richey, Florida 34652		
3.1 TITLE	Treasurer		
3.2 NAME	David Syraski		
3.3 STREET ADDRESS	7410 State Road 54		
3.4 CITY-ST-ZIP	New Port Richey, Florida 34653		
4.1 TITLE	Secretary		
4.2 NAME	Charon Bogner		
4.3 STREET ADDRESS	6014 U.S. Highway 19, Suite 202		
4.4 CITY-ST-ZIP	New Port Richey, Florida 34652		
5.1 TITLE	Executive Director		
5.2 NAME	Marillynn deChant		
5.3 STREET ADDRESS	P.O. Box 622		
5.4 CITY-ST-ZIP	New Port Richey, Florida 34656		
6.1 TITLE	Director		
6.2 NAME	Gerald Seeber		
6.3 STREET ADDRESS	5919 Main Street		
6.4 CITY-ST-ZIP	New Port Richey, Florida 34652		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marillynn deChant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marillynn deChant

3/21/95 (813) 842-8066

Date Daytime Phone

1994-95 BOARD OF DIRECTORS

1. Marc W. Bowman President 847-7138
Barnett Bank Fax 847-7336
6128 U. S. Hwy. 19
New Port Richey, FL 34652
2. Scott Chittum Vice President 849-1000
Richey Realty Economic Restructure Fax 845-8860
7000 U.S. Hwy. 19 Committee - Chair
New Port Richey, FL 34652
3. David Syraski Treasurer 861-4353
SunBank Fax 376-2065
7410 State Road 54
New Port Richey, FL 34653
4. Charon Bogner Secretary 843-8600
Bouchard Financial Services, Inc. Fax 843-0413
6014 U.S. Hwy. 19, Suite 202 Promotion Comm. -
New Port Richey, FL 34652 Chair
5. Gerald Seeber Ex Officio 841-4515
City Manager, NPR Fax 841-4575
5919 Main Street
New Port Richey, FL 34652
6. David Schrader 942-7600
First South Bank Fax 934-1986
2211 U. S. Hwy. 19
Holiday, FL 34690
7. Dr. Niles Kinnunen, Jr. 849-5446
5801 Main Street Fax 845-7662
New Port Richey, FL 34652
8. Bob Cresson Design Committee - 372-8714
Chair
6522 Sunhigh Drive
New Port Richey, FL 34655
9. Joan Rees 845-8747
Gone Again Travel Fax 846-9065
5242 Main Street
New Port Richey, FL 34652
10. John Herig 849-1942
Cathedral Automotive/Texaco
5731 Main Street
New Port Richey, FL 34652
11. Dr. Donald Cadle, Jr. 842-6052
5823 Main Street Fax 843-8338
New Port Richey, FL 34652

N/4029

12. Richard C. Williams
Williams & Williams
6337 Grand Boulevard
New Port Richey, FL 34652
849-2269
Fax 846-8500
13. Connie Burke
Committee of 100
4111 Land O'Lakes Blvd., Ste. 305
Land O'Lakes, FL 34639
847-6823
Fax 846-7663
14. Bob Clifford
Sertoma Speech & Hearing Foundation
5130 Trouble Creek Road
New Port Richey, FL 34652
Membership Development - 848-5371
Chair Fax 844-3490
15. Marilyn deChant
NPR Community Cooperative, Inc.
P. O. Box 622
New Port Richey, FL 34656-0622
Exec. Dir. 842-8066
Fax 841-4575