## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

N14029 DOCUMENT #

(5)

NEW I	PORT RICHEY COMMUNITY	Y COOPERATIVE,	INC.					
Principal Place of Business Mailing Address						I IBBIFFE   DOT	A HOLL BLOUE BLOCK DIGEL O	<b>                                    </b>
5919 MAIN ST.  NEW PORT RICHEY FL 34652  US  P.O. BOX 622  NEW PORT RICHEY FL 346  US			56				7	
. <u></u>						3. Date Incorporated or Qualified 03/26/1986	3a. Date of La 04/11	ast Report <b>/1995</b>
2. Principal F	Principal Place of Business  SAME  2a. Mailing Address  26			tmE		4. FEI Number 59-2684075		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, (	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	75 Additional
City & Sta	te	City & State	City & State			6. Election Campaign Financing	_ \$5	.00 May Be
Zip	Country	<b>28</b> Zip		Counts		Trust Fund Contribution	LJ Ad	Ided to Fees
24	25	29	30	Country		This corporation has liability for in Florida Statutes	intangible tax under □ Yes □ No	r s. 199,032,
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New R	egistered Agent	
DAMED I	) COUNTRE			81	Name			
	P. SCHRADER . S. HWY 19			82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)	
	Y FL 34690			83			<del></del>	···
				84	City		FL  85	Zip Code
familiar w	to the provisions of Sections 617.050 gred agent, or both, in the State of Flow with, and accept the obligations of, Section 11.050 it.	02 and 617.1508, Florida rida. Such change was a ction 617.0503, Florida S	Statutes, ti ithorized b atutes.	he above-n by the corpo	amed corpo oration's boa	oration submits this statement for the pur ard of directors. I hereby accept the appo	<del></del>	s registered office red agent. I am
SIGNATURE	Signature, typed or printed name of registered ager	nt and lite if applicable.	(NOTE: R	ugistered Apent	signature requir	ed when reinstating)	DATE	
12.		ND DIRECTORS		13.	- 3	ADDITIONS/CHANGES TO OFFE		TORS IN 12
TITLE	P POWERLAND MADO W	DELET	E	1.1 TITLE			Chang	e 🔲 Addition
NAME	BOWMAN, MARC W. 6128 US HWY 19			1.2 NAME				
STREET ADDRESS	NEW PT RICHEY FL			1.3 STREET				
CITY-ST-ZIP TITLE	VP	[]DELET	F	1.4 CITY-ST 2.1 TITLE	- ZIP			. Dane
NAME	CHITTUM, SCOTT		_	2.1 THE 2.2 NAME			Chang	e 🔲 Addition
STREET ADDRESS	7000 US HWY 19			2.3 STREET	ADDRESS	, /	`. <i>X</i>	
CITY+ST-ZIP	NEW PORT RICHEY FL			2. 4 CITY - S			N'N'	
TITLE	T OVER SOME SAME	DELET	E	3.1 TITLE		~ <b>y</b> /	☐ Chang	e 🔲 Addition
NAME	SYRASKI, DAVID			3.2 NAME		8/.	Γ	
STREET ADDRESS	7410 STATE ROAD 54 NEW PT RICHEY FL			3.3 STREET A				
CITY-ST-ZIP	S	DELET		3.4. CITY - S	r-ZIP			
NAME	BOGNER, CHARON	Decei	_	4.1 TITLE 4. 2 NAME			Chang	e 🔲 Addition
STREET ADDRESS	6014 US HWY 19 STE 202			4. 2 NAME	nnbecc			
CITY-ST-ZIP	NEW PORT RICHEY FL			4.4 CITY-ST				
TITLE	D	DELET		5.1 TITLE	<u> </u>	-/X 1)~	Change	e  Addition
NAME	DECHANT, MARILYNN			5.2 NAME	.	/ \		
STREET ADDRESS	PO BOX 622			5.3 STREET A	ADDRESS /	U		
CITY-ST-ZIP	NEW PORT RICHEY FL			5.4 CITY-ST	-ZIP			
TITLE	D OFFICE OFFICE	DELET		61 TITLE			☐ Changi	e 🔲 Addition
NAME	SEEBER, GERALD			62 NAME	/			
STREET ADDRESS	5919 MAIN ST			6.3 STREET A	nddress			İ

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)(k), 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.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

**NEW PT RICHEY FL** 

CITY-ST-ZIP

@ 13/842-8066 Daytine Prone #

## 1995-96 BOARD OF DIRECTORS

Marc W. Bowman Barnett Bank 6128 U.S. Hwy 19 New Port Richey, FL 34652	President	Fax	847-7158 847-7336
Joan Rees Gone Again Travel 5242 Main Street New Port Richey, FL 34652	Vice-President Nominations Committee - Chair	Fax	845-8747 846-9065
David Syraski Sunbank 6335 U.S. Hwy 19 New Port Richey, FL 34652	Treasurer	Fax	816-1002 849-8490
Gerald Seeber City Manager, NPR 5919 Main Street New Port Richey, FL 34652	Ex Officio	Fax	841-4515 841-4575
David Schrader First South Bank 2211 U.S. Hwy 19 Holiday, FL 34690		Fax	942-7600 934-1986
Bob Creson 6522 Sunhigh Drive New Port Richey, FL 34655	Design Committee - Chair		372-8714
John Herig Cathedral Automotive/Texaco 5731 Main Street New Port Richey, FL 34652	Nominations Committee		849-1942

Richard C. Williams, Esq. 6337 Grand Boulevard New Port Richey, FL 34652	Economic Restructure Chair	Fax	846-8500 848-2814
Bob Clifford Sertoma Speech & Hearing Foundation 5640 Main Street New Port Richey, FL 34652	Membership Development - Chair		848-5371 834-5421
Doreen Arevalo 5540 Clipper Court New Port Richey, FL 34652		849	9-9523 (h) 9-6690 (w) 3-3771 (fx)
Susan Compton B's Place 6213 Grand Boulevard New Port Richey, FL 34652		Fax	849-1655 849-1655
Jim Rinker 5323 Main Street New Port Richey, FL 34652		Fax	847-1251 845-4366
Mike Ryan Village Homes P. O. Box 1119 Elfers, FL 34680		Fax	372-8400 846-1522
Marilynn deChant NPR Community Cooperative, Inc. P.O. Box 622 New Port Richey, FL 34656-0622	Executive Director	Fax	842-8066 841-4575