

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000000098 (3)

1. Corporation Name

FT. KING FAMILY RESOURCE CENTER, INC.



Principal Place of Business

Mailing Address

13 NE 36TH AVE.
OCALA FL 34470

13 NE 36TH AVE.
OCALA FL 34470

3. Date Incorporated or Qualified
01/07/1994

3a. Date of Last Report
02/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3218269

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

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

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOXLEY, JOHN
2320 NE 2ND ST.
SUITE 4
OCALA FL 34470**

81

Name

82

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

83

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

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	DP	<input type="checkbox"/> DELETE
NAME	STEELE, DIANE	
STREET ADDRESS	3209 NE 14TH AVE.	
CITY - ST - ZIP	OCALA FL 34479	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	KINNUNEN, KAY	
STREET ADDRESS	611 SE 41ST AVE.	
CITY - ST - ZIP	OCALA FL 34471	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CORNELL-OHLMAN, JOANN	
STREET ADDRESS	13 NE 36TH AVE	
CITY - ST - ZIP	OCALA FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	BUSH, DEBBIE	
STREET ADDRESS	5550 SE 44TH AVE.	
CITY - ST - ZIP	OCALA FL 34471	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BULLOCK, ERVIN	
STREET ADDRESS	505 SE 61ST ST.	
CITY - ST - ZIP	OCALA FL 34471	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BLAES, TERRY	
STREET ADDRESS	4005 SE FT. KING ST.	
CITY - ST - ZIP	OCALA FL 34470	

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	See list of current Board Members attached
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	
22 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	
32 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	
42 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	
52 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	
62 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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.

SIGNATURE: *John Moxley* Secretary

2/29/96 1(352) 732-8085

CR2E037 (12/95)

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Fort King Resource Center
Board Members

D
Pat Bishop
1216 NE 17th Terrace
Ocala, FL 34470

D
Jo Ann Parramore
3620 SE 22nd Avenue
Ocala, FL 34471

D
Terry Blaes
4005 E. Fort King Street
Ocala, FL 34470

D
Lenore Phillips
5145 NE 7th Place
Ocala, FL 34470

D
Ervin Bullock
505 SE 61st Court
Ocala, FL 34472

D
Russell Rasco
1761 SE 38th Court
Ocala, FL 34470

P D
Larry Bush
5550 SE 44th Avenue
Ocala, FL 34480

D
Addie Rawls
2251 SE 52nd Court
Ocala, FL 34471

V D
David MacKay
2730 SE 16th Street
Ocala, FL 34471

D
Becky Schatt
1251 SW 43rd Place
Ocala, FL 34474

D
Dr. Roanne Moreno
311 SE 53rd Court
Ocala, FL 34471

T D
Diane Steele
3209 NE 14th Ave.
Ocala, FL 34479

S D
John Moxley
3933 SE 13th Street
Ocala, FL 34471

D
Jan Stone
1921 NW 44th Street
Ocala, FL 34475

D
Joanne Ohlman
P. O. Box 901
Ocala, FL 34478