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 # **N95000000170 (9)**

1. Corporation Name

THE CONCERNED CITIZENS OF MULBERRY AND THE SURRO UNDING AREAS INCORPORATED

Principal Place of Business	Mailing Address
P.O. BOX 471 MULBERRY FL 33860	P.O. BOX 471 MULBERRY FL 33860

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **01/12/1995**

3a. Date of Last Report:

4. FEI Number: ☑ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

TAYLOR, JULIE W
707 S.E. 3RD STREET
MULBERRY FL 33860

10. Name and Address of New Registered Agent

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 Julie W. Taylor, President — April 28, 1996
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TAYLOR, JULIE W		1.2 NAME		
STREET ADDRESS	707 S.E. 3RD STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BROWN, SANDRA		2.2 NAME		
STREET ADDRESS	602 S.E. 5TH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860		2.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, ELLESTINE		3.2 NAME		
STREET ADDRESS	601 N.W. 2ND STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860		3.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, DONNA		4.2 NAME		
STREET ADDRESS	304 S.W. 3RD AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860		4.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	5.1 TITLE	400001810294	☐ Change ☐ Addition
NAME	SMITH, JOHNNIE B		5.2 NAME	-05/07/96--01011--043	
STREET ADDRESS	1004 S.E. 2ND STREET		5.3 STREET ADDRESS	***61.25	
CITY-ST-ZIP	MULBERRY FL 33860		5.4 CITY-ST-ZIP		
TITLE	CHAP	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BROOKS, CHARLES		6.2 NAME		
STREET ADDRESS	706 S.E. 3RD STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860		6.4 CITY-ST-ZIP		

CR2E037 (12/95)

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: Julie W. Taylor — April 28, 1996 — (904) 499-2929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #