

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 # N95000002948 (6)

1. Corporation Name

HAPPINESS HOUSE EASTER SEAL FOUNDATION, INC.



Principal Place of Business

Mailing Address

350 BRADEN AVENUE
SARASOTA FL 34243

350 BRADEN AVENUE
SARASOTA FL 34243

3. Date Incorporated or Qualified
06/21/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0611186

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

CELORIE, DENNIS J
350 BRADEN AVENUE
SARASOTA FL 34243

81 Name

Joseph L. Najmy, Esquire

82

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

83

1205 Manatee Ave W.

84

City
Bradenton

FL

85 Zip Code
34205

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

2/12/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME Judge, Virginia M.
STREET ADDRESS 630 Magellan Dr
CITY-ST-ZIP Sarasota, FL 34243

☐ DELETE

TITLE VD
NAME Kinnan, Marge
STREET ADDRESS 5903 Riverview Blvd W
CITY-ST-ZIP Bradenton, FL 34209

☐ DELETE

TITLE SD
NAME Armitage, Charles
STREET ADDRESS 555 S. Gulfstream Ave # 901
CITY-ST-ZIP Sarasota, FL 34236

☐ DELETE

TITLE TD
NAME Fogarty, Eugene
STREET ADDRESS 1201 6th Ave W
CITY-ST-ZIP Bradenton, FL 34205

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-96 (813) 355-7637

Date

Daytime Phone #

CR2E037 (12/95)