2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2004 8:00 am
Secretary of State
02-19-2004 90029 020 ****61.25

DOCUMENT # N97000001610

1. Entity Name

JOE NIC BARCO MEMORIAL POST AUXILIARY, INC.

Principal Place of Business	Mailing Address
IDA M PONTON 8350 E DERBY OAKS DR FLORAL CITY FL 34436	IDA M PONTON 8350 E DERBY OAKS DR FLORAL CITY FL 34436

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
KELLY LYBEK	KELLY LYBEK
Suite, Apt. #, etc.: 2909 HARRISON ST. W	Suite, Apt. #, etc.: 2909 HARRISON ST. W
City & State: INVERNESS, FLA	City & State: INVERNESS, FLA
Zip: 34453 Country:	Zip: 34453 Country:

4. FEI Number: 59-3213394 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PONTON, IDA M 8350 E DERBY OAKS DR FLORAL CITY FL 34436	Name: KELLY LYBEK Street Address (P.O. Box Number is Not Acceptable): 2909 HARRISON ST. W City: INVERNESS FL Zip Code: 34453

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Kelly Lybek 2/14/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SHERROD, ELLEN 8360 S. COVE PT. FLORAL CITY FL 34436	☐ Delete	SHERROD. ELLEN 8360 S. COVE PT FLORAL CITY. Fla 34436	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MARSH, PATRICIA 11515 S. TURNER AVE. FLORAL CITY FL 34436	☐ Delete	MARSH. PATRICIA 8237 S. FLORIDA AVE FLORAL CITY, Fla 34436	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ZIEMENDORF, CAROLE 6348 E. WAVERLY ST. INVERNESS FL 34452	☐ Delete	ZIEMENDORF. CAROLE 6348 E. WAVERLY ST INVERNESS. Fla 34452	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PONTON, IDA M 8350 E. DERBY OAKS DR. FLORAL CITY FL 34436	☒ Delete	KELLY LYBEK 2909 HARRISON ST.W INVERNESS. Fla 34453	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FERGERSON, LYNN 8360 S COVE ST FLORAL CITY FL 34436	☐ Delete	FERGERSON. LYNN 8360 S. COVE PT FLORAL CITY. Fla 34436	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kelly Lybek KELLY LYBEK 2-14-04 352-637-2111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #