

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25228

**Entity Name:** MASON CITY COMMUNITY CENTER, INC.

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC0585123897**

**Current Principal Place of Business:**

MARGIE MARKHAM  
833 SW MARKHAM STREET  
LAKE CITY, FL 32024

**Current Mailing Address:**

MARGIE MARKHAM  
833 SW MARKHAM STREET  
LAKE CITY, FL 32024

**FEI Number: 59-2892722**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THOMAS, DUANE E.  
206 SOUTH MARION STREET  
LAKE CITY, FL 32056 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VPD  
Name HORNE, ELIZABETH P  
Address P O BOX 1645  
City-State-Zip: LAKE CITY FL 32056

Title D  
Name MARKHAM, THOMAS  
Address 4406 SE CR 252  
City-State-Zip: LAKE CITY FL 32025

Title SD  
Name MARKHAM, MARGIE LOU  
Address 833 SOUTHWEST MARKHAM STREET  
City-State-Zip: LAKE CITY FL 32024

Title TD  
Name JONES, DAISY M  
Address 4515 EAST UNITED STATES  
HIGHWAY 90  
City-State-Zip: LAKE CITY FL 32055

Title D  
Name RYALS, VALERIE W.  
Address 709 SOUTHEAST ORMOND WITT  
ROAD  
City-State-Zip: LAKE CITY FL

Title PD  
Name DICKS, HARRY G  
Address 1676 SOUTHEAST FAMILY ROAD  
City-State-Zip: LULU FL 32061

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: DAISY MAE JONES**

**TREASURE**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date