FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

1. Corporation Name 706247

(4)

SOUTHEASTERN YEARLY MEETING, RELIGIOUS SOCIETY O

r raicindo, ino.									
Principal Place of Business Mailing Address									
1822 MEDAR Tallahasse	1822 MEDART DR. TALLAHASSEE FL 3230								
·						 Date Incorporated or Qualified 10/04/1963 	3a. Date of Las 04/25/	•	7
	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	コ
21 Cuito Ant	H ata	26				59-1226463 Not Applicable			<u>, </u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State				Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curren	t Registered Agent		81 Nam					
MANDO	LANG, NADIE				M	ANDOLANG, NA			
1822 MEDART DR.				82 Stree	et Address	(P.O. Box Number is Not Acceptable	}		
	ASSEE FL 32303		Ì	83					7
			-	84 City			les 7	ip Code	-
								•	
11. Pursuant t or register familiar wil	to the provisions of Sections 617.0502 red agent, or both, in the State of Noric th, and accept the obligations of, Sect	and 617.1508, Florida Statute la. Such change was authorize on 617.0503, Florida Statutes.	es, the above ed by the c	/e-named orporation	corporation's board of	on submits this statement for the purp of directors. I hereby accept the appoin	ose of changing its ntment as registere	registered offic d agent. I am	ē
SIGNATURE	V adu	e) Vandel	<u> </u>			l/3x		······	
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12	⊒ 8
TITLE	TR	DELETE	DELETE 1.1 TI				Change	Addition	CR2E037 (12/95)
NAME	WOLFE, BARBARA			ME					37
STREET ADDRESS	17920 BURNSIDE ROAD			1.3 STREET ADDRESS					ĺЙ
CITY-ST-ZIP TITLE	LUTZ FL 33549	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			™ Change	Addition	二兴
NAME	T/TR	Dottert					pa change	LD ADDITION	
STREET ADDRESS	HAIGH, HERBERT 800 MADONNA BLVD.			2.3 STREET ADDRESS 45		6th Avenue North			
CITY-ST-ZIP	TIERRA VERDE FL 33715			2. 4 CITY-ST-ZIP		U = 111 4 113			
THILE	S	DELETE		3.1 TITLE			Change	Addition	\dashv
NAME	MANDOLANG, NADINE	<u> </u>		ME					
STREET ADDRESS	1822 MEDART DR.		3.3 STI	REET ADORES	5		•		
CITY-ST-ZIP	TALLAHASSEE FL 32303		3.4. CI	TY-ST-ZIP	1				
TITLE	TR	DELETE 4.1		LE			☐ Change	☐ Addition	┪
NAME	Lepke, John		4. 2 NA	ME					
STREET ADDRESS	1100 S.W. 25 PLACE		4.3 STI	REET ADORES	3				
CITY - ST - ZIP	GAINESVILLE FL 32601		4.4 CIT	Y-ST-ZIP					
TITLE	TR	DELETE 51TI		LE			Change	■ Addition	7
NAME	JORDAN, STEVE		5.2 NA	ME	1				
STREET ADDRESS	3116 CHELSEA ST.		5.3 STI	REET ADDRES	5				
CITY-ST-ZIP	ORLANDO FL 32803			Y-ST-ZIP	4				_
THLE	P	DELETE	6.1 TIT		-		Change	Addition Addition	
NAME	HOWARD, GAY		6.2 NA		-				
STREET ADDRESS	2705 NEUCHATEL			REET ADDRES	5				
CITY-ST-ZIP	TALLAHASSEE FL 32303 overtify that the information supplied y	with this filing is voluntarily furni		Y-ST-ZIP	uality for 4	he everantian stated in Costian 440.0	7(2)(b) Florido C*-*	etan I fi webar	

Too liereby certify that the information supplied with this hing is voluntarily furnished and does not quality 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 (changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR