

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2007 8:00 am
Secretary of State

02-20-2007 90038 002 ****61.25

DOCUMENT # 716113

1. Entity Name
SILVER SPRINGS RADIO CLUB, INC.



Principal Place of Business
319 SE 26TH CT
OCALA, FL 34471

Mailing Address
P.O. BOX 787
SILVER SPRINGS, FL 34489-0787

4000000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02162007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2501600

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

FRANTZ, JEANETTE
2801 SOUTHWEST COLLEGE ROAD, STE. 9
OCALA, FL 34474

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

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
D
MERKEL, RUSSELL
EIGHT BANYON TRACK
OCALA, FL 34472 ☒ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Jeannette Frantz*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/07 352-342-3735
Date Daytime Phone #

ATTACHMENT
40020849
#716113

ATTACHMENT TO 2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT
DOCUMENT #716113

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	P/D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition EARL SWEENEY 5995 NE 63 RD STREET SILVER SPRINGS, FL 34488
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	V/D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition RON TOLLER 8115 SW 76 TH AVENUE OCALA FL 34476
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	T/D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition BRITT, WILLIAM C. 3216 SE 35 TH STREET OCALA FL 34471
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	S/D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition FRANTZ, JEANETTE 5291 SW 129 TH COURT OCALA FL 34481
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition HILL, WALTER 5610 SW 57 TH COURT OCALA FL 34474
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition WAYNE HODGMAN 114600 NE 112 TH CT FT. MCCOY FL 32134
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	D <input type="checkbox"/>Change <input checked="" type="checkbox"/>Addition CARLOS C CHEKER 306 SE 29 TH AVE OCALA FL 34471
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	<input type="checkbox"/>Change <input type="checkbox"/>Addition
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