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 # 722904 (0)

1. Corporation Name

HERNANDO COUNTY SERTOMA CLUB, INC.

Principal Place of Business
1715 SPRING HILL DRIVE
P.O. BOX 3267
SPRINGS HILL FL 34606

Mailing Address
1715 SPRING HILL DRIVE
P.O. BOX 3267
SPRINGS HILL FL 34606

3. Date Incorporated or Qualified: 03/15/1972
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 51-0224611 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

UNDERWOOD, ALAN W
210 OLIVE ST.
BROOKSVILLE FL 33512

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _______ (Note: Registered Agent signature required when reinstating) DATE _______

12. OFFICERS AND DIRECTORS

TITLE	V	☐ DELETE
NAME	WITTMEYER, ALVIN R	
STREET ADDRESS	6490 RIVER LODGE LN	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	SD	☐ DELETE
NAME	HINES, GORDON	
STREET ADDRESS	7313 WESTERN CIRCLE DR	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	PD	☐ DELETE
NAME	WELLS, WILLIAM	
STREET ADDRESS	5341 JOYNER AVE	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	V	☐ DELETE
NAME	HUMMEL, CHARLES	
STREET ADDRESS	13498 LAWRENCE STREET	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	VD	☐ DELETE
NAME	HEIDT, HENRY	
STREET ADDRESS	2488 EVENGLOW AVENUE	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	TD	☐ DELETE
NAME	GIBBONS, JOHN T.	
STREET ADDRESS	7368 ACORN CIR.	
CITY-ST-ZIP	SPRING HILL FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE ☐ Change ☐ Addition
1-2 NAME
1-3 STREET ADDRESS
1-4 CITY-ST-ZIP
2-1 TITLE ☐ Change ☐ Addition
2-2 NAME
2-3 STREET ADDRESS
2-4 CITY-ST-ZIP
3-1 TITLE ☐ Change ☐ Addition
3-2 NAME
3-3 STREET ADDRESS
3-4 CITY-ST-ZIP
4-1 TITLE ☐ Change ☐ Addition
4-2 NAME
4-3 STREET ADDRESS
4-4 CITY-ST-ZIP
5-1 TITLE ☐ Change ☐ Addition
5-2 NAME
5-3 STREET ADDRESS
5-4 CITY-ST-ZIP
6-1 TITLE ☐ Change ☐ Addition
6-2 NAME
6-3 STREET ADDRESS
6-4 CITY-ST-ZIP

No change

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: John T. Gibbons
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96
Date

(352) 683-1946
Daytime Phone #

CR2E037 (12/95)