## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

Daytime Phone # 0071385

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

725980

(7)

## OKEECHOBEE CITIZENS RECREATIONAL ASSOCIATION

Principal Place	e of Business	Mailing Address					1 189111 (8918 11991			#1811 <b>#1</b> 811	41411 21011 (EB)
PO BOX 414 OKEECHOBEE FL 34973-414 US		PO BOX 414 OKEECHOBEE FL 34973-0414 US									
00							3. Date Incorporated 04/03/1978	or Qualified	3a. Date	3/29/1	Report <b>996</b>
2. Principal Pi	ace of Business	2a. Mailing Address 26				4. FEI Number 59-172295	0		——————————————————————————————————————	applied For lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired X \$8.75 Additional Fee Required					
City & State	9	City & State					<ol><li>Election Campaign Trust Fund Contrib</li></ol>	_	<u>\vec{x}</u>		) May Be I to Fees
Zip	Country	Zip	Co	untry			8. This corporation ha	·			
24	25	29	30	30			Florida Statutes		Yes 🗱	No	
	9. Name and Address of Curren	t Registered Agent		81	Mana		0. Name and Addres	s of New Re	gistered A	gent	
	DAD			81	Name	•					
	AN, BOB E 72 CIR. W. BOX 27		82 Street Addr			Address	(P.O. Box Number is	Not Acceptab	le)		<del></del>
	HOBEE FL 34972			83							
				84	City				FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 617.050.	2 and 617.1508. Florida Statu	ites, the a	bove	-named	corpora	tion submits this state	ment for the p	urpose of o	hanging	its registered
office or re	to the provisions of Sections 617,050 egisteren ageot, prooth in the State m langar with and accupante oblige	of Florida, Such change was	authorize	ed by	the cor	rporation'	s board of directors. I	hereby accep	t the appo	intment a	s registered
SIGNATURE	Mill Dered	Michael	Benn	ett	. Tı	reasu	rer		1/13/9	<del>9</del> 7	
	Signature typed or printed name of registered age	n) and title if applicable (NO	TE: Registere	ed Ager	nt signature	w beriuper e	hen reinstating)		DATE		
12.	OFFICERS ANI		13.			<del></del>	ADDITIONS/CHANG	SES TO OFFIC			
TITLE	PD ANGE	<b>₹</b> DELETE		TITLE					L	Change	Addition
NAME	SLAYTON, MICKI			MAME							
STREET ADDRESS	2793 SE 18TH TERRACE				ADDRESS						
CITY - ST - ZIP	OKEECHOBEE, FL 00000 VD	<b>X</b> XDELETE		TITLE	-ZIP	1.75				Change	Addition
TITLE	KEMP, JIMMY	K.AULLELL	1	NAME			y dowii s		•	Farmingo	Last reduition
NAME STREET ADORESS	13252 NE 26TH AVE				ADDRESS		ing, Jimmy Box 1013				
	OKEECHOBEE, FL 00000		1	CITY-S			chobee, Fl.	34973			
CITY-ST-ZIP TITLE	SD SD	KXDELETE			1-61	SD	chobee, rr.	34773	1	Change	Addition
NAME	KEMP, SUE		3.11	NAME			er, Cindy		-	•	
STREET ADDRESS	13252 NE 26TH AVE		1		ADDRESS		NW 50 Drive				
CITY-ST-ZIP	OKEECHOBEE, FL 00000		3.4.	CITY-S	T- ZIP	1	chobee, Fl.	34972			
TITLE	TD	<b>KX</b> DELETE	4.1 1	TITLE					Ţ	Change	Addition
NAME	MOODY, DEBBIE		4.2	NAME							
STREET ADDRESS	1605 SW 5TH AVENUE	0.0	4.3 5	STREET	address		•••	and the specific of the specif	Section 1		
City-St-Zip	OKEECHOBEE FL			CITY-S	r-ZIP	<u> </u>					<del></del>
TITLE	PD	☐ DELETE		TITLE					l	Change	Addition
NAME	HARDMAN, BOB			NAME							
STREET ADDRESS	6120 NE 72 CIR. W. BOX 27				ADORESS			•			
CITY-ST-ZIP	OKEECHOBEE FL	☐ DELETE		CITY-ST	- ZIP	<del> </del>				Change	Addition
TITLE	TD Bennett, Mike			TITLE			9000	0207	മാന്	기 <u>년</u> 기년	FILE WOULDON
NAME OTREET ADDRESS	7400 NW 84 CT.			NAMÉ CTOCET	ADDRESS		9000 -02/05/	97010	3203	30 ·	らも
STREET ADDRESS	OKEECHOBEE FL		- 1	CITY-SI			***75.0	ŋ		· •	STA'
CITY-ST-ZIP 14. I do here!	by certify that the information supplie	d with this filing does not qua	lify for the	8 8X <b>9</b>	mption s	stated in	Section 119.07(3)(i), F	lorida Statute	s. I further	certify the	at the
informatic	by certify that the information supplie on indicated on this annual report or a afficer or director of the corporation on Block 12 or Bijley 13 if changes, o	supplemental annual report is	true and	accu exec	rate and ute this	d that my	signature shall have to required by Chanter	the same lega 617, Florida S	l effect as i	if made u	nder oath; that
appears i	in Block 12 or Bijlel 3 if changed, o	r on an attachment with an ac	ddress.	2,,00		. uport de	qa oo ay onaptor	a . r j + romment C		- 10 mar 111 <b>)</b>	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,