10 2611 0 FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

HIGHLANDS EMERGENCY SHELTER OF CITRUS COUNTY, IN Ç.

4325 SOUTH LITTLE AL POINT PO BOX 724 INVERNESS FL 34451 US			4325 SOUTH LITTLE AL POINT PO BOX 724 INVERNESS FL 34451-0724 US					ř		
						3. Date Incorporated or 0 10/17/1973	tualified 3a	. Date of Last R 02/05/19		
2. Principal Pi	lace of Business		2a. Mailing Address			4. FEI Number		Ar	plied For	
21			26			59-1648876			t Applicable	
Suite, Apt #, etc.			Suite, Apt. #, etc.			5. Certificate of Status De	sired 🕱	\$8.75 Fee Re	Additional equired	
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 24	25	Country	Zip 29	Country 30		8. This corporation has lie Florida Statutes	☐ Yes	[2K vo	. 199.032,	
Name and Address of Current Registered Agent					,	10. Name and Address of	New Register	red Agent		
				81	Name	Mrs. Frances	Himpel-	е		
PRESTI, GASPER 6280 E PLUM STREET					Street /	Street Address (62 Box Number is Not Acceptable) treet				
INVERNI	ESS FL 34452			83		Inverness, Fl	orida.	5445Z		
*				84	City			■L 85 Zip	Code	
11. Pursuant	to the provisions	of Sections 617.0502 a	nd 617.1508, Florida Statut	es, the abov	e-named	corporation submits this statemen	for the purpos	se of changing it	s registered	
agent. Fa	regisiered agent, i im familiar with, a r	or both, in the state of no accept the obligation	nonda. Such change was ons of, Section 617.0503, Fl	authorized bi orida Statute	y tne corp s.	corporation submits this statemen poration's board of directors. I here	by accept the	appointment as	registered	
SIGNATURE	FRANC		PELE , PRE							
L	Signature typed or prin	ted name of registered agent a	· · · · · · · · · · · · · · · · · · ·		ent signature	required when reinstating)	DA		20.01.40	
12.	PD	OFFICERS AND D	DRECTORS & DELETE	13. 1.1 TITLE	η	ADDITIONS/CHANGES		AND DIRECTOR Change	Addition	
NAME	GASPER, PI	CCTI	To nerete			Frances Himpe			- INTERNATION	
STREET ADDRESS	6280 E PLU			1.2 NAME: 1.3 STREET		6262 B. Malve				
CITY - ST - ZIP	INVERNESS			1.4 CITY - 5	,	Inverness, Fl	orida	34452	"	
TITLE	VD	<u> </u>	DELETE	2.1 TITLE	71-21	,	••••	☐ Change	Addition	
NAME	RUSSO, MA	rie		2.2 NAME				-		
STREET ANDRESS	907 PINEAIF			2.3 STREET	ADDRESS					
CITY-ST-ZIP	INVERNESS	FL	Sec.	2. 4 CITY-	ST-ZIP				*	
TITLE	VD		DELETE	3.1 TITLE	AD.	william Frank		Change	Addition	
NAME	DEL ROSSO			3.2 NAME	:	3976 ALPI Inverness, Fl	NEA	V C. 1		
STREET ADDRESS		RLDWIDE DRIVE		3.3 STREET		Tuverness, Li	.ur rua	ノササノム		
CITY-ST-ZIP	INVERNESS	<u>rl</u>	☐ DELETE	3.4. CITY-	ST-ZIP D''	William H. La	πουν	Change	Addition	
TITLE NAME	TD NIDAOLO E	DANY		4.1 TITLE 4.2 NAME		6044 E. Tennis	ann et	FTI CURUBE	Addition	
STREET ADDRESS	DIPAOLO, F 3355 COLLE			4. 2 NAME		Inverness, Fl				
CHTY-ST-ZIP	INVERNESS			4.4 City - 9			・・・フィナング			
TITLE	SD		DELETE	5.1 TITLE	,, <u>, , , , , , , , , , , , , , , , , ,</u>	D Vincent Del	Rosso	☐ Change	Addition	
NAME	LA TOUR, H	IELEN		5.2 NAME		4820 S. Wor	ldwide		= "	
STREET ADDRESS	6044 E TEN			5.3 STREET	ADDRESS	Inverness,				
CITY - ST - ZIP	INVERNESS	FL		5.4 CITY - 8	ST-ZIP	•		-		
TITLE	D		☐ DELETE	6.1 TITLE		D Antoinette	Magg10	re∏ Change	Addition	
NAME		r, theresa		6.2 NAME		6339 E. Red				
STREET ADDRESS	5992 E LOR			6.3 STREET		Inverness,	エエ・ 24	452		
CITY-ST-ZIP	INVERNESS	FL		6.4 CITY - S	T-ZIP					

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). 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.

ohlands Emergency Shelter Citrus County Inc. P.O. Box 724 Inverness FL 34451

February 27, 1997

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee Florida 22302-1500

Gentlemen:

Our officers and Board of Directors for 1997 are the following:

First V.P. Second VP Treasurer Sect.

Pres. - Frances Himpele Marie Russo Wm. Frank Frank Di Paolo Helen, La Tour

6262 E. Malverne St. Inverness 907 Pineaire St. Inverness 34452 3976 Alpine Ave. Inverness 34452 3355 College Ave. Inverness 34452 6044 E. Tenison St. Inverness 34452

BOARD OF DIRECTORS

Vincent Del Rosso Theresa Woythaler

4820 S. Worldwide Dr. Inverness William La Tour 6044 E. Tenison St. Inverness Antoinette Maggiore 6339 E. Rector St. Inverness 34452

5992 E. Loring Lane, Inverness 34452

Our check in the amount of \$70.00 dated Jan. 21, 1997 is returned. Please credit the Highlands Emergency Shelter and send us our Certificate of Status.

Sincerely,

Helen C. La Tour Secretary