

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 # 729517 (3)

1. Corporation Name

HOMOSASSA SPRINGS AREA CHAMBER OF COMMERCE, INC.



Principal Place of Business

3495 S. SUNCOAST BLVD.  
PO BOX 709  
HOMOSASSA SPRINGS FL 34447-0709  
US

Mailing Address

3495 S. SUNCOAST BLVD.  
PO BOX 709  
HOMOSASSA SPRINGS FL 34447-0709  
US

3. Date Incorporated or Qualified  
05/01/1974

3a. Date of Last Report  
03/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1543952

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

27

City & State

24

Zip

Country

28

Zip

Country

25

29

30

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

10. Name and Address of New Registered Agent

RUSSELL, JOHN  
ROOM 101 CITRUS OFFICE PLAZA  
HOMOSASSA SPRINGS FL 32647

81

Name JOHN T BARNES

82

Street Address (P.O. Box Number is Not Acceptable)  
7373 W Hadenotter Lane

83

Homosassa, Florida 34446

84

City

FL

85

Zip Code  
34446

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

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

John Barnes

(NOTE: Registered Agent signature required when reinstating)

DATE

March 13, 1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME BARNES, JOHN, T  
STREET ADDRESS 7373 W HADENOTTER LANE  
CITY-ST-ZIP HOMOSASSA FL

TITLE ☒ DELETE

NAME DEVOE, DENNIS  
STREET ADDRESS 6121 E RECTOR ST  
CITY-ST-ZIP INVERNESS FL

TITLE ☐ DELETE

NAME STRAIGHT, MARIE  
STREET ADDRESS 4395 SO SUNCOAST BLVD  
CITY-ST-ZIP HOMOSASSA FL

TITLE ☐ DELETE

NAME PRACK, JUDY  
STREET ADDRESS 3938 S SUNCOAST BLVD  
CITY-ST-ZIP HOMOSASSA FL

TITLE ☐ DELETE

NAME BELL, JOSEPH  
STREET ADDRESS 1088 S SOFTWIND LOOP  
CITY-ST-ZIP LECANTO FL

TITLE ☐ DELETE

NAME HOFMEISTER, JAMES A F  
STREET ADDRESS 3266 S WESTMORELAND DR  
CITY-ST-ZIP HOMOSASSA SPRINGS FL

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

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, on or as an attachment with an address.

SIGNATURE:

*John Barnes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 13, 1996 352 628-2666  
Date Daytime Phone #

CR2E037 (12/95)

1996 BOARD OF DIRECTORS  
HOMOSASSA SPRINGS CHAMBER OF COMMERCE

ROGER O BATCHELOR, DIRECTOR  
2051 N HEART PATH  
CRYSTAL RIVER, FL 34429

C.L. CALLOWAY, PRESIDENT ELECT  
5330 W GULF TO LAKE HWY  
CRYSTAL RIVER, FL 34429

JIM FALKENBURG, DIRECTOR  
1122 N SUNCOAST BLVD  
CRYSTAL RIVER, FL 34429-5474

MICHAEL L GUDIS, DIRECTOR  
1 GOLFVIEW DRIVE  
HOMOSASSA, FL 34446

RONALD MAYER, DIRECTOR  
4325 S SUNCOAST BLVD  
HOMOSASSA, FL 34446

BROADUS MOORE, DIRECTOR  
5309 ISABEL TERRACE  
HOMOSASSA, FL 34446

JEANETTE McDONALD, TREASURER  
4475 S SUNCOAST BLVD  
HOMOSASSA, FL 34446

DAVE WARREN, DIRECTOR  
4870 S SUNCOAST BLVD  
HOMOSASSA, FL 34446

TONY WIESEN, SECRETARY  
6895 W APPIAN WAY  
HOMOSASSA, FL 34446