

DOCUMENT # 730433

1. Entity Name

GREATER CHIEFLAND CHAPTER #1840 OF AMERICAN ASSO

Principal Place of Business

Mailing Address

ST JOHN CATHOLIC CHURCH
ALT 427
CHIEFLAND FL 32626
US

PO BOX 893
CHIEFLAND FL 32644-0893
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7380135

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

LEGRAND, RICHARD W
7791 N.E. 138TH LANE
BRONSON FL 32621

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Delete
NAME RICHARD LEGRAND
STREET ADDRESS 7791 NE 138TH LANE
CITY-ST-ZIP BRONSON FL 32621

TITLE P ☒ Change ☐ Addition
NAME KATHY HELLWIG
STREET ADDRESS 12951 NW 92ND ST
CITY-ST-ZIP CHIEFLAND, FL 32626

TITLE S ☐ Delete
NAME RUTH BALCHUCK
STREET ADDRESS RT. 3 BOX 157
CITY-ST-ZIP OLD TOWN FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME RUTTER, E. GENEVIEVE
STREET ADDRESS 8631 NW 125TH ST
CITY-ST-ZIP CHIEFLAND FL 32626

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME FOUTZ, DOROTHY
STREET ADDRESS 13411 NE 18TH TERRACE
CITY-ST-ZIP TRENTON FL 32693

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME HELLWIG, JAMES
STREET ADDRESS 12951 NW 92ND ST.
CITY-ST-ZIP CHIEFLAND FL 32626

TITLE D ☒ Change ☐ Addition
NAME ELSIE ODOM
STREET ADDRESS 9023- NW 128 CT.
CITY-ST-ZIP CHIEFLAND, FL 32626

TITLE D ☒ Delete
NAME JONES, BERT
STREET ADDRESS 9124 NW 128 CT
CITY-ST-ZIP CHIEFLAND FL 32626

TITLE D ☒ Change ☐ Addition
NAME LYNN LEGRANDE
STREET ADDRESS 7791 NE 138TH LANE
CITY-ST-ZIP BRONSON, FL 32621

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or without other like empowered.

SIGNATURE:

E. GENEVIEVE RUTTER, Treas.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90146 020 ****61.25



DO NOT WRITE IN THIS SPACE