

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # 732573

(1)

1. Corporation Name

COMMUNITY THRIFT SHOP, INC.



Principal Place of Business

420 41ST. ST. W.
BRADENTON FL 34209

Mailing Address

420 41ST. ST. W.
BRADENTON FL 34209

3. Date Incorporated or Qualified
04/25/1975

3a. Date of Last Report
03/30/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

23-7439471

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

10. Name and Address of New Registered Agent

BLALOCK, ROBERT G.
1101 8TH AVENUE WEST
BRADENTON FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME HAYES, LINDA
STREET ADDRESS 2403 LANDINGS CIR
CITY-ST-ZIP BRADENTON FL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VP
NAME ORANDER, GEORGETTE
STREET ADDRESS 7306 13TH AVE W.
CITY-ST-ZIP BRADENTON FL ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE T
NAME TOMMASI, MARILYN
STREET ADDRESS 3780 PINEBOORCK CR #307
CITY-ST-ZIP BRADENTON FL ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S
NAME AMIN, MARILYN
STREET ADDRESS 8843 WILD DUNES DR.
CITY-ST-ZIP SARASOTA FL 34241 ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME POUCHER, PAT
STREET ADDRESS 1411 43RD AVE. DR. WEST
CITY-ST-ZIP PALMETTO FL 34221 ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE P
NAME HOAGLAND, MARY
STREET ADDRESS 801 26TH AVE. WEST
CITY-ST-ZIP PALMETTO FL 34221 ☐ DELETE

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, or on an attachment with an address.

SIGNATURE:

Marilyn Tommasi

Marilyn Tommasi

Treasurer

3/19/96

941-795-8829

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

732573

2 8 2

DIRECTORS

Miner, Marsha
216 46th St., N.W.
Bradenton, Fl. 34209

Mancini, Joyce
1600 1st Ave., N.W.
Bradenton, Fl. 34205

Kindred, Jay
211 48th St., N.W.
Bradenton, Fl. 34209