

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 737117 (2) 1. Corporation Name TRI-COUNTY HUMAN SERVICES, INC.					
Principal Place of Business 37 THIRD ST. SW PO BOX 9306 WINTER HAVEN FL 33883-6306			Mailing Address 37 THIRD ST. SW PO BOX 9306 WINTER HAVEN FL 33883-6306		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/22/1976	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1708182	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent BEHREND, CASEY S TRI-COUNTY HUMAN SERVICES, INC. 37 THIRD STREET, S.W. WINTER HAVEN FL 33883			10. Name and Address of New Registered Agent 81 Name Wilcox, W. D. 82 Street Address (P.O. Box Number is Not Acceptable) 948 Heron Court 83 84 City Winter Haven FL 85 Zip Code 33884		
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 <i>W.D. Wilcox</i> DATE 1/15/97 (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	Secretary	☐ Change ☐ Addition
NAME	LAWRENCE, AMY		1.2 NAME	Myrick, Diana	
STREET ADDRESS	P. O. BOX 1414 N/A		1.3 STREET ADDRESS	P. O. Box 3913A	
CITY-ST-ZIP	AVON PARK FL		1.4 CITY-ST-ZIP	Bartow, FL 33831	☐ Change ☐ Addition
TITLE	D	☒ DELETE	2.1 TITLE		
NAME	ALUMBAUGH, LARRY		2.2 NAME		
STREET ADDRESS	2102 CREEK BEND DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE LAND FL		2.4 CITY-ST-ZIP		
TITLE	T	☒ DELETE	3.1 TITLE	Treasurer	☒ Change ☐ Addition
NAME	KOON, WILEY DR		3.2 NAME	Wilcox, W. D.	
STREET ADDRESS	635 FIRST ST. N.		3.3 STREET ADDRESS	948 Heron Court	
CITY-ST-ZIP	WINTER HAVEN FL 33881		3.4 CITY-ST-ZIP	Winter Haven, FL 33884	☐ Change ☐ Addition
TITLE	D	☐ DELETE	4.1 TITLE		
NAME	EVERS, JOEL		4.2 NAME		
STREET ADDRESS	810 W PALMETTO ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	WAUCHULA FL		4.4 CITY-ST-ZIP		
TITLE	CHM	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	TOMLINSON, VIDA		5.2 NAME		
STREET ADDRESS	412 W. ORANGE SR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	WAUCHULA FL 33873		5.4 CITY-ST-ZIP		
TITLE	VC	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SPANGERS, BENNIE		6.2 NAME		
STREET ADDRESS	2100 CRUMP ROAD		6.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		6.4 CITY-ST-ZIP		
14. 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 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: <i>W.D. Wilcox</i> DATE 1/15/97					



CR2E037 (10/97)

Paul B. Cate 363 Third St., N. W. Winter Haven, Fl. 33881
Linda Cunniff 1012 N. Riverdale Rd. Avon Park, Fl. 33825
Dr. David Neal 400 Ave. K, S. W. Winter Haven, Fl. 33880
Walter Olliff, Jr. 412 W. Orange St. Rm. A204 Wauchula, Fl. 33873
Dr. John A. Stewart 1103 Cypress Pt. Dr., W. Winter Haven, Fl. 33884
Linda Troupe 611 Post Ave. S. E. Winter Haven, Fl. 33880