

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Aug 11 1997 8:00am  
Secretary of State

DOCUMENT # 743391 (5)

1. Corporation Name

CHARLOTTE J. HENDERSON SENIOR CITIZENS INCORPORATED

Principal Place of Business

Mailing Address

407 S. MAIN ST.  
HAVANA FL 32333

407 S. MAIN ST.  
HAVANA FL 32333

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1978

3a. Date of Last Report

03/08/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

4. FEI Number

59-0285460

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENDERSON, CHARLOTTE  
407 S MAIN ST  
HAVANA FL 32333

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 PD ☐ DELETE

NAME HENDERSON, CHARLOTTE  
STREET ADDRESS 407 S. MAIN ST  
CITY-ST-ZIP HAVANA FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME BROWN, WILLIE LEE  
STREET ADDRESS 328 SE FOURTH ST  
CITY-ST-ZIP HAVANA FL

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME CHANDLER, MARY J.  
STREET ADDRESS P.O. BOX 130 N/A  
CITY-ST-ZIP HAVANA FL

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME MORGAN, RUBEN  
STREET ADDRESS RT 4, BOX 667  
CITY-ST-ZIP HAVANA FL

4.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME BULTER, MALLIE  
STREET ADDRESS RT. 3, BOX 194  
CITY-ST-ZIP HAVANA FL

5.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME RICHARDSON, WILLIE MAE  
STREET ADDRESS 801 S. MAIN ST  
CITY-ST-ZIP HAVANA FL

6.1 TITLE ☐ Change ☐ Addition

14. I do 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, as changed, or on an attachment with an address.

SIGNATURE REQUIRED

8/6/97 1997 5253

CR2E037 (4/97)