

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 # 752692

(4)

1. Corporation Name

FLORIDA BUCKSKIN ASSOC. INC.



Principal Place of Business

RT. 1. BOX 332
ALACHUA FL 32615

Mailing Address

RT. 1. BOX 332
ALACHUA FL 32615

3. Date Incorporated or Qualified

05/30/1980

3a. Date of Last Report

03/22/1995

2. Principal Place of Business

2a. Mailing Address

21 **10308 NW 161st St**

26 **10308 NW 161st St.**

4. FEI Number

59-2380739

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

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

FL

28 City & State

FL

24 Zip

25 Country

USA

29 Zip

32615

30 Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCQUAGGE, LISA W.
6321 NW 187 TERR
RT 4 BOX 318
ALACHUA FL 32615**

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

Lisa W. McQuagge

(NOTE: Registered Agent signature required when reinstalling)

3/18/96

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PV**
STREET ADDRESS **MUNZ, ERIN**
CITY - ST - ZIP **PO BOX 281 N/A**
OXFORD FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **S**
1.3 STREET ADDRESS **Diane Rought**
1.4 CITY - ST - ZIP **5206 Turkey Creek Rd**
Plant City, FL 33569

TITLE ☒ DELETE
NAME **S**
STREET ADDRESS **WALLS, MICHELE**
CITY - ST - ZIP **5770 LAKE LIZZIE DR**
ST CLOUD FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **Director**
2.3 STREET ADDRESS **Wayne Rought**
2.4 CITY - ST - ZIP **5206 Turkey Creek Rd**
Plant City, FL 33569

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **MCQUAGGE, LISA**
CITY - ST - ZIP **6321 NW 187 TERR**
ALACHUA FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **D**
3.3 STREET ADDRESS **Cathy Crum**
3.4 CITY - ST - ZIP **1538 Capitol Circle NW**
Tallahassee, FL 32303

TITLE ☒ DELETE
NAME **D**
STREET ADDRESS **MYLES, CHERYL**
CITY - ST - ZIP **P. O. BOX 3029 N/A**
HOMOSASSA SPGS. FL

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

TITLE ☒ DELETE
NAME **D**
STREET ADDRESS **SCOPANO, RAY**
CITY - ST - ZIP **4428 TEVACO DR**
VALRICO FL

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **WILLIAMS, PAT**
CITY - ST - ZIP **610 SW BEND POINT**
LECANTO FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME **500001753585**
6.3 STREET ADDRESS **-03/22/96--01003--025**
6.4 CITY - ST - ZIP *****61.25**

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:

Lisa W. McQuagge

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96

Date

(904) 462-5968

Daytime Phone #

CR2E037 (12/95)