

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

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DOCUMENT # 752825 (0)

1. Corporation Name

CITIZENS ASSOCIATION OF PORT RICHEY, INC.



Principal Place of Business

Mailing Address

8406 CAROLYN DRIVE
PORT RICHEY FL 34668
US

8406 CAROLYN DRIVE
PORT RICHEY FL 34668
US

3. Date Incorporated or Qualified
06/06/1980

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2092079

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

HEITNER, ELINOR
8406 CAROLYN DRIVE
PORT RICHEY FL 34668

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: *Elinor S. Heitner*

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

(NOTE: Registered Agent signature required when reinstating)

4/9/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME HEITNER, ELINOR
STREET ADDRESS 8406 CAROLYN DRIVE
CITY-ST-ZIP PORT RICHEY FL

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME RAIMOND, PATRICK
STREET ADDRESS 5238 MILLER BAYOU DRIVE
CITY-ST-ZIP PORT RICHEY FL

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE T ☐ DELETE
NAME HADDEN, KATHERINE
STREET ADDRESS 8511 OLD POST RD.
CITY-ST-ZIP PORT RICHEY FL

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE S ☒ DELETE
NAME FOLEY, PATRICIA
STREET ADDRESS 8414 CAROLYN DRIVE
CITY-ST-ZIP PORT RICHEY FL

41 TITLE ☒ Change ☐ Addition
42 NAME DOMBROWSKI, EVELYN
43 STREET ADDRESS 4850 BAY PARK DR.
44 CITY-ST-ZIP PORT RICHEY, FL 34668

TITLE D ☒ DELETE
NAME DOMBROWSKI, EVELYN
STREET ADDRESS 4850 BAY PARK DRIVE
CITY-ST-ZIP PORT RICHEY FL

51 TITLE ☒ Change ☐ Addition
52 NAME DSAL. SAIZILLO
53 STREET ADDRESS 7807 CHABCO
54 CITY-ST-ZIP PORT RICHEY, FL 34668

TITLE D ☐ DELETE
NAME ALLEN, FRANCIS
STREET ADDRESS 5102 MILLER BAYOU DRIVE
CITY-ST-ZIP PORT RICHEY FL

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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: *Elinor S. Heitner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/96 (813) 846-1838

Date

Daytime Phone #

CR2E037 (12/95)

752 825

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Officers Citizens Assoc. of Port Richey, Inc.

D

Florence Peterson

5140 Miller Bayou Dr.

Port Richey, Fl. 34668

D

Murray GUTTMAN

8444 Green St

Port Richey, Fl. 34668