

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90115 031 ****61.25

DOCUMENT # 760556

1. Corporation Name

HERNANDO COUNTY 4-H CLUB FOUNDATION, INC.

Principal Place of Business

19490 OLIVER ST
BROOKSVILLE FL 34601-6538
US

Mailing Address

19490 OLIVER ST
BROOKSVILLE FL 34601-6538
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

3. Date Incorporated or Qualified

10/22/1981

4. FEI Number

59-2160397

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

9. Name and Address of Current Registered Agent

ODEGAARD, WAYNE
19490 OLIVER ST
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent

81 Name

Moore, Nancy A.

82 Street Address (P.O. Box Number is Not Acceptable)

19490 Oliver St.

83

84 City

Brooksville

FL

85 Zip Code

34601-6538

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

Nancy A. Moore NANCY A. MOORE, Agent

03/26/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME RICHARDS, KIM
STREET ADDRESS 163 ESTATES AVE.
CITY-ST-ZIP BROOKSVILLE FL

TITLE DT ☐ DELETE
NAME ROLLER, GLORIA
STREET ADDRESS 10000 FT. KING RD.
CITY-ST-ZIP DADE CITY FL

TITLE DP ☒ DELETE
NAME NEAL, HARRIET
STREET ADDRESS 5209 CULBREATH RD.
CITY-ST-ZIP BROOKSVILLE FL

TITLE DS ☐ DELETE
NAME COWIE-WARD, CATHY
STREET ADDRESS 16300 GUPTON STREETQ
CITY-ST-ZIP BROOKSVILLE FL

TITLE D ☐ DELETE
NAME CLAUDIA HENDRY
STREET ADDRESS 2235 RACKLEY RD.
CITY-ST-ZIP BROOKSVILLE FL 34609

TITLE D ☒ DELETE
NAME WING, BECKY
STREET ADDRESS 24472 MAE HIGHT ROAD
CITY-ST-ZIP BROOKSVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVP ☐ Change ☒ Addition
1.2 NAME Hamilton, Paula
1.3 STREET ADDRESS 29399 Soult Rd.
1.4 CITY-ST-ZIP Brooksville, FL 34602

2.1 TITLE DP ☒ Change ☐ Addition
2.2 NAME Roller, Gloria
2.3 STREET ADDRESS 10000 Ft. King Rd.
2.4 CITY-ST-ZIP Dade City, FL 33525

3.1 TITLE DT ☐ Change ☒ Addition
3.2 NAME Sessions, Terry
3.3 STREET ADDRESS 13517 Citrus Way
3.4 CITY-ST-ZIP Brooksville, FL 34601

4.1 TITLE D ☒ Change ☐ Addition
4.2 NAME Cowie-Ward, Cathy
4.3 STREET ADDRESS 16300 Gupton St.
4.4 CITY-ST-ZIP Brooksville, FL 34601

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

6.1 TITLE DS ☐ Change ☒ Addition
6.2 NAME Wagner, Janette
6.3 STREET ADDRESS 27427 Hiawatha Blvd.
6.4 CITY-ST-ZIP Brooksville, FL 34601

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, with all other like empowered.

SIGNATURE:

Gloria Roller Gloria Roller

4/14/99

Date

(352) 588-5900

Daytime Phone #

CR2E037 (11/98)