

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 13 PM 1:24

DOCUMENT # 767755 (2)

1. Corporation Name

UPPER SUNCOAST CHAPTER OF THE RETIRED OFFICERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**% ROBERT FRANKEL
PO BOX 854
PORT RICHEY FL 34673-0854
US**

Mailing Address
**PO BOX 854
PT RICHEY FL 34673-0854
US**

3. Date Incorporated or Qualified **03/30/1983** 3a. Date of Last Report **03/14/1994**
4. FEI Number **59-2277756** Applied For ☐
Not Applicable ☒

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent

**FRANKEL, ROBERT
10060 CHIP LANE
NEW PORT RICHEY FL 34654**

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JACKSON, CHARLES F
STREET ADDRESS	8900 SHARON DR
CITY-ST-ZIP	NEW PORT RICHEY FL
TITLE	D
NAME	WIGGINS, ROBERT
STREET ADDRESS	9521 GRAY FOX LANE
CITY-ST-ZIP	PT RICHEY FL
TITLE	VD
NAME	GRACE, HARLEY G
STREET ADDRESS	7401 CASCADE DR
CITY-ST-ZIP	HUDSON FL
TITLE	SD
NAME	FRANKEL, ROBERT
STREET ADDRESS	10060 CHIP LANE
CITY-ST-ZIP	NEW PORT RICHEY FL
TITLE	TD
NAME	REISINGER, EDWARD
STREET ADDRESS	4141 SCHOONER LANE
CITY-ST-ZIP	NEW PORT RICHEY FL
TITLE	D
NAME	CUNNINGHAM, MELVILLE D
STREET ADDRESS	5024 ISLA VERDE CT
CITY-ST-ZIP	NEW PORT RICHEY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	Grace, HARLEY G.	
1.3 STREET ADDRESS	7401 CASCADE DRIVE	
1.4 CITY-ST-ZIP	HUDSON, FL 34667-2445	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	CORNELL, ROBERT	
2.3 STREET ADDRESS	8100 CASUARINA DRIVE	
2.4 CITY-ST-ZIP	PORT RICHEY, FL 34668-3007	
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	Stucker, Robert W	
3.3 STREET ADDRESS	4454 MITCHER RD	
3.4 CITY-ST-ZIP	NEW PORT RICHEY, FL 34652	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 110.07(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: *Robert Frankel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Frankel

Feb 5, 1995

(813) 869-9435



**UPPER SUNCOAST CHAPTER OF
THE RETIRED OFFICERS ASSOCIATION, INC.**

**P.O. Box 854
Port Richey, Florida 34288-0854**

February 5, 1995



THE FOLLOWING IS A CONTINUATION OF QUESTION #12

**Additional Directors of the Upper Suncoast Chapter, The Retried
Officers Association Inc.**

VD

**Luter, Thomas
8510 Forest Glade Drive
Hudson, FL 34667-2132**

D

**Sabel, August
4948 South Shore Drive
New Port Richey, FL 34552-3038**

D

**Perez, Johnny
P.O. Box 101
Odessa, FL 33556-0101**

D

**Bucher, Bernice
13232 Molitor Court
Hudson, FL 34669**

D

**Sweat, Melvin
18420 Lansford Drive
Hudson, FL 34667**

D

**Brock, Lester A.
3540 Hogan Drive
New Port Richey, FL 34655-2003**


**Robert Frankel
Secretary**