

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

1-26-96 B-0366-C
(2)

DOCUMENT # 767755

1. Corporation Name

UPPER SUNCOAST CHAPTER OF THE RETIRED OFFICERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% ROBERT FRANKEL
PO BOX 854
PORT RICHEY FL 34673-0854
US

PO BOX 854
PT RICHEY FL 34673-0854
US

3. Date Incorporated or Qualified
03/30/1983

3a. Date of Last Report
02/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Francis G. Bennett

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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25

29

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4. FEI Number

59-2277756

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

FRANKEL, ROBERT
10060 CHIP LANE
NEW PORT RICHEY FL 34654

81 Name
Bennett, Francis G.

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

4425 Gulfside Dr.

83 New Port Richey FL 34652

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 Francis G. Bennett, Scty

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

(NOTE: Registered Agent signature required when reinstating)

1/21/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME GRACE, HARLEY G.
STREET ADDRESS 7401 CASCADE DRIVE
CITY - ST - ZIP HUDSON FL

TITLE D ☐ DELETE
NAME CORNELL, ROBERT
STREET ADDRESS 8100 CASUARINA DRIVE
CITY - ST - ZIP PT RICHEY FL

TITLE VD ☐ DELETE
NAME STUCKER, ROBERT W.
STREET ADDRESS 4454 MITCHER ROAD
CITY - ST - ZIP NEW PORT RICHEY FL

TITLE SD ☒ DELETE
NAME FRANKEL, ROBERT
STREET ADDRESS 10060 CHIP LANE
CITY - ST - ZIP NEW PORT RICHEY FL

TITLE TD ☒ DELETE
NAME REISINGER, EDWARD
STREET ADDRESS 4141 SCHOONER LANE
CITY - ST - ZIP NEW PORT RICHEY FL

TITLE D ☐ DELETE
NAME CUNNINGHAM, MELVILLE D
STREET ADDRESS 5024 ISLA VERDE CT
CITY - ST - ZIP NEW PORT RICHEY FL

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Stucker, Robert W.
1.3 STREET ADDRESS 4454 Mitcher Rd.
1.4 CITY - ST - ZIP New Port Richey FL 34652

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME Looney Edmund P. Jr.
3.3 STREET ADDRESS 1642 Kainsmere Dr.
3.4 CITY - ST - ZIP New Port Richey FL 34655

4.1 TITLE SD ☒ Change ☐ Addition
4.2 NAME Bennett, Francis G.
4.3 STREET ADDRESS 4425 Gulfside Dr.
4.4 CITY - ST - ZIP New Port Richey FL 34652

5.1 TITLE VD ☒ Change ☐ Addition
5.2 NAME Ailman, William G.
5.3 STREET ADDRESS 11240 Areca Dr.
5.4 CITY - ST - ZIP Port Richey FL 34688

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 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: Francis G. Bennett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 21, 1996 (8) 813 842 4676

Date

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Daytime Phone #

CR2E037 (12/95)