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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 19 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

1998
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ZEPHYRHILLS-DADE CITY CHAPTER OF THE SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF

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Principal Place of Business Mailing Address									(100) 181 11 10 1 10 1 1 16 1 16 1 16 16 16 16	81811 81815 B183	i Bigli ÿì	E11 419 11 (4 6)
\$510 19TH 8T				6005 10TH ST.				3.	Date Incorporated or Qualified			******
ZEPHYRHILLS FL 33540				ZEPHYRHILLS FL 33540			-	02/27/1984				
US								4.	FEI Number		An	piled For
									36-3399678			t Applicable
2. Principal Place of Business				2s. Malling Address				R		\$1	3.75 /	Additional
21				26					Communicate of Otalias Dashar L		Fee Re	quired
Suite, Apt. W. etc.				Suite, Apt. #, etc.			6.	Election Campaign Financing			May Be	
22				7 City & State			Trust Fund Contribution Added to Fees					
City & State				26			7. Is this nonprofit corporation a homeowners association?					
Zip Country			150]	Zip Country			<u>В.</u>	This corporation owes or has paid			angible	
24	25		29	├─ ┐ ` ├──		ĺ	-, ,		Personal Property Tax due June 30			No
9. Name and Address of Curren								10. Name and Address of New Registered Agent				
							Name					
REHRIG, RODNEY BLAINE, SR.						82	Street Ad	reet Address (P.O. Box Number is Not Acceptable)				
6005 10TH ST.						83						. ,
ZEPHYRHILLS FL 33540												
							City			FL 85	Zip	Code
11. Pireilant	to the provisions	of Sections 617.050)2 and 6	17.1508. Florida Statu	tes. the	abov	e-named co	rporatio	on submits this statement for the puri		nging it	s registered
office or re	egistered agent, m familiar with. a	or both, in the State	of Flori	da. Such change was f, Section 617.0503. Fl	authoriz orida St	ed by	y the corpor	ation's t	on submits this statement for the pur board of directors. I hereby accept t	he appointn	vent as	registered
SIGNATURE _												
Signature, typed or printed name of registered agent and title if applicable (NOTE:							ent signature rec			DATE	COTO	C IN 12
12.		OFFICERS AN	ID DIREC	CTORS DELETE	13		————		ADDITIONS/CHANGES TO OFFICER		ECTOR Change	Addition
TITLE	ST OCHDIO DO	MAILA D OD		LJ DELETE		TITLE					n en An	rionitoti
NAME						NAME						
STREET ADDRESS	999 BA 154 BA 134 A . FA						T ADDRESS					
CITY-ST-ZIP	DP				1.4 CITY-ST-ZIP 2.1 TITLE					Change	Addition	
NAME	BIANBRIDGE, E RUSSELL			___		2.2 NAME					•	
STREET ADDRESS							T ADDRESS					
CITY-ST-ZIP	MENING IN LA CI						ST-ZIP					
TITLE	VP		DELETE 3.1		TITLE		в.			Change	Addition	
NAME	COVENEY, GEORGE T.			3.2 N		NAME						
STREET ADDRESS	ss 3613 RANGER PARKWAY			3.3 \$1			T ADDRESS					
CITY+ST-ZIP	ZEPHYRHIL	LS FL			_		ST-ZIP			· · · · · · · · · · · · · · · · · · ·	Nh	A dallata -
TITLE	VO			☐ DELETE		TITLE				U	Change	Addition
NAME	BRADIGAN,					NAME						
STREET ADDRESS	4739 LAKES						T ADDRESS					
CITY-ST-ZIP	ZEPHYRHIL	LLS FL		DELETE	_		ST-ZIP			г	Change	Addition
TITLE	DAGE NIMO	361 EV LI		☐ ocrete		TITLE					er eus right	Page 7 WOOTHOT
NAME	PAGE, KING					NAME	l l					
STREET ADDRESS	ZEPHYRHIL	Muda drive					t address St-Zip					
CITY-ST-ZIP TITLE	VDVP	LOFL		DELETE	_	TITLE	91-4W		<u> </u>		Change	Addition
NAME	GIBSON, CI	HARI ES				NAME	1		1.		-	
STREET ADDRESS		BOULEVARD LO	T 242		1		T ADDRESS					
SINEL MULINESS	TEDUVDUII	I C EI	75			01704	AT 710		9.			

2EPHYRHILLS FL

14. Thereby 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.

SIGNATURE: Codney Blance Central Records Blaine Rehrig, Sr. March 9, 1998 782-4600