

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90225 002 ****61.25

DOCUMENT # N05189	
1. Entity Name OSCEOLA COUNTY 4-H FOUNDATION, INC.	

Principal Place of Business 1921 KISSIMMEE VALLEY LANE KISSIMMEE FL 34744	Mailing Address 1921 KISSIMMEE VALLEY LANE KISSIMMEE FL 34744
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-2482252	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CINDY K. MOORE 1921 KISSIMMEE VALLEY LANE KISSIMMEE FL 34744
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7. Name and Address of New Registered Agent Name Joy A. Borgman - see attached change letter Street Address (P.O. Box Number is Not Acceptable) 1921 Kissimmee Valley Lane City Kissimmee, FL Zip Code 34744

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Delete D LUTHE, JILL 4760 HIDDEN LANE SAINT CLOUD FL 34772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete D LANIER, TERRY 1930 HAM BROWN RD KISSIMMEE FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete SD CLAYTON, GINGER 1400 S BOW ST KENANSVILLE FL 34739-0190
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete PD BROOKS, CLIFF 3550 GREEN ACRES RD ST CLOUD FL 34772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete VD KIRKENDALL, KAREN 2522 HIGHLAND AVE KISSIMMEE FL 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete TD Loretta M. Hunt 2400 Cypress Lane Kissimmee, FL 34746

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Loretta M. Hunt **Loretta M. Hunt** **4/19/05** **321-697-3000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 20043399
#N05189

**2004/2005 OSCEOLA COUNTY
4-H FOUNDATION**

PRESIDENT

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Denise Collins wf 407-891-8663
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St. Cloud, FL 34771
deezdog1@earthlink.net

VICE PRESIDENT

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Karen.kirkendall@vacationclub.com

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TREASURER

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