

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90190 006 ****61.25

DOCUMENT # N07000007121 1. Entity Name AMERICAN HOMETOWN FUNDRAISER, INC.					
Principal Place of Business 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038			Mailing Address PO BOX 274 FORT WHITE, FL 32038		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
04282008 Chg-NP CR2E037 (12/06)  					
4. FEI Number 87-0803605				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILDER, CHARLES E 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILDER, CHARLES E 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S/D WILDER, CHARLES E 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERRICK, CLINT 4343 288TH TERRACE BRANFORD, FL 32008 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D HERRICK, CLINT 4343 288TH TERRACE BRANFORD, FL 32008 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILDER, SUSAN 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D WILDER, SUSAN 256 SW CALIFORNIA TERRACE FORT WHITE, FL 32038 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILDER, FAYE 268 SW CALIFORNIA TERRACE FORT WHITE, FL 32038 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILDER, FAYE 3548 MORGANTON RD. MARYVILLE, TN 37801 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEPHEN CADE 531 NW 54TH TERRACE GAINESVILLE, FL 32607 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		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 exemptions contained in Chapter 119, 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: <u>Charles E. Wilder</u> CHARLES E. WILDER			APRIL 28, 2008 386-965-1947		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		