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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(1)

PORT RICHEY ORGAN SOCIETY, INC.

| Pr | incipal Place | of Business | | Mailing Addres | SS | | | | 4 1041(10) 011 08 | imi amama sessa maman s | BILL BIBAL BIBIL | 979IL WIBII W | (AIT EIBIL ISAL |
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| C | O RALPH T. | BALSAM | | C/O RALPH T. | BALSAM | | | İ | | 1. | | | |
| P.O. BOX 254 PORT RICHEY FL 34873-0254 | | | | P.O. BOX 254 PORT RICHEY FL 34873-0254 | | | | | | | | | |
| P | ORT RICHEY | FL 34673-0254 | | PURI HICHET | FL 340/3-0234 | , | | 3. 1 | Date Incorporate 03/25/198 | or Qualified | 3a. Date | of Last Fie | eport |
| | | | | | _ | | | I | | 35 | <u> </u> | 3/04/19 | 96 |
| 2. | Principal Pl | ace of Business | | 2a. Mailing Add | dress | | | 4. [| FEI Number 59-26030 | 60 | | Ap | plied For |
| 21 | | | | 26 | | | | | 38-20030 | 02 | | | t Applicable |
| | - Suite, Apt 4 I | #, etc. | | Suite, Apt. | #, etc. | | | 5. (| Certificate of Stat | us Desired | | 88.75 A Fee Re | Additional |
| 22 | City & State | າ | | City & State | 9 | | | | Election Campaig | n Einancing | | | ·· |
| 23 | | | | 28 | | | | | Trust Fund Contri | | | \$5.00 Added t | |
| | Zip | Co | untry | Zip | | Country | | В. 1 | This corporation I | nas liability for in | ntangible tax | | |
| 24 | | 25 | | 29 | 30 | 5] | | | Florida Statutes | | Yes 🔀 I | | |
| | | 9. Name and A | ddress of Current | Registered Agent | <u> </u> | | | | Name and Addre | ess of New Rec | platered Age | ent | |
| | | | | | | 61 | Name | | | | | | |
| | | i, ralph | | | | 82 | Street | Address (P. | O. Box Number is | Not Acceptab | le) | | |
| | | LM AVE. | | | | 83 | | | | | | ··· | |
| | PURI R | ICHEY FL 34668 | | | | . 63 | | | | | | | |
| | | | | | | 84 | City | | | | FL | 85 Zip (| Code |
| 4. | 1 Purcuant t | to the provisions of | Sections 617 0502 | and 617 1508 Flo | rida Statutee | the eboye | -named | corporation | cubmite this stat | ement for the n | | anging It | e registered |
| ļ • | office or re | egistered agent, or m familiar with, and | both, in the State of | of Florida, Such cha | ange was auti | horized by | the con | poration's bo | pard of directors. | I hereby accep | t the appoin | tment as | registered |
| | - | m tamiliar wiin, and | accept the obliga- | lions of Section of | 7.0503, FIORO | ia Statintes | 5. | | | | • | | |
| S | ignature _ | Signature typed or printed | i name of registered agen | t and little if applicable. | (NOTE: R | egistered Age | ent signature | e required when r | reinstating) | | DATE | | |
| 1: | 2. | | OFFICERS AND | DIRECTORS | | 13. | | А | DDITIONS/CHAN | GES TO OFFIC | ERS AND D | IRECTOR | S IN 12 |
| Ti | TLE | D | | | DELETE | 1.1 TITLE | ħ. | ۵. | | | | Change | Addition |
| | | | | | | | w. | | | | | 1 Oliveride | F. FIGORIUS |
| N/ | ME | BALSAM, RAL | | | | 1.2 NAME | ν. | LOUI | SE KIE | NLE | | , orango | P. Fidewich |
| | AME REET ADDRESS | 9420 PALM A | VE | | | | - | LOUI | SE KIEL B CARI | nle ssa | | , orango | Pidomon |
| ST CI | REET ADDRESS TY+S1-ZIP | 9420 PALM A PORT RICHEY | VE | 1 | | 1.2 NAME 1.3 STREET 1.4 CITY - S | ADDRESS | LOUI | SE KIEI B CARI. BRT R | nle Sa Ichey, | FL. | | |
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Secretary of State

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