

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

DOCUMENT # **N13490** (0)

1. Corporation Name

HERNANDO COUNTY SHERIFF'S JUNIOR DEPUTY LEAGUE, INC.



Principal Place of Business

Mailing Address

**18900 CORTEZ BLVD
P O BOX 10070 (MAILING ADDRESS)
BROOKSVILLE FL 34601-7070**

**18900 CORTEZ BLVD
P O BOX 10070 (MAILING ADDRESS)
BROOKSVILLE FL 34601-7070**

3. Date Incorporated or Qualified
02/19/1986

3a. Date of Last Report
03/10/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-6019767

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

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

**BIERWILER, FRANK
4526 DELTONA BLVD.
SPRING HILL FL 34606**

81 Name

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

83

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **MYLANDER, THOMAS A.**
STREET ADDRESS **18900 CORTEZ BLVD**
CITY-ST-ZIP **BROOKSVILLE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD** ☒ DELETE
NAME **BATTISTA, RITA**
STREET ADDRESS **205 SUNSET DRIVE**
CITY-ST-ZIP **BROOKSVILLE FL**

2.1 TITLE **Vice President/Director** ☒ Change ☐ Addition
2.2 NAME **Lucille Chrisafulle**
2.3 STREET ADDRESS **5408 Patricia Place**
2.4 CITY-ST-ZIP **Weeki Wachee Spgs., FL 34607**

TITLE **SD** ☐ DELETE
NAME **HANLEY, JOHN P.**
STREET ADDRESS **4187 BAY RIDGE COURT**
CITY-ST-ZIP **SPRING HILL FL**

3.1 TITLE **Sec'y/Treas.** ☒ Change ☐ Addition
3.2 NAME **Nancy Marino**
3.3 STREET ADDRESS **7463 Dearborn Avenue**
3.4 CITY-ST-ZIP **Brooksville, FL 34613**

TITLE **TD** ☐ DELETE
NAME **CHRISAFULLE, LUCILLE**
STREET ADDRESS **5408 PATRICIA PLACE**
CITY-ST-ZIP **WEEKI WACHEE SPRINGS FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **CHRISTENSEN, TED**
STREET ADDRESS **7508 SHEPHERD AVE.**
CITY-ST-ZIP **SPRING HILL FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **ZUYUS, JOSEPH**
STREET ADDRESS **6633 TREEHAVEN DRIVE**
CITY-ST-ZIP **SPRING HILL FL**

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: *[Signature]*

SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. MYLANDER

2-17-96

252-784-6830

Date

Daytime Phone #

CR2E037 (12/95)

Additional Directors

Dick Buckingham 33449 Ohio Ave., Ridge Manor 34602	583-2441
Ed Cambridge 5308 Spring Hill Dr., Spring Hill 34606	688-9790
Ted Christensen 7508 Shepherd Ave., Spring Hill 34606	686-1031
Walter Dry P.O. Box 5143, Spring Hill 34606	686-1140
Dick Fehrenbach 10472 Monarch St., Spring Hill 34608	686-7897
Gus Guadagnino (Joni Industries) 16230 Aviation Loop Dr., Brooksville 34609	799-5456
John Hanley 4187 Bay Ridge Ct., Spring Hill 34606	683-3267
Eric Jude 528 Fieldstone Lane, Spring Hill 34606	686-0821
Bruce McElroy 8575 Electra Avenue, Brooksville 34613	597-2437
Chuck Miller 5157 Harbinger Rd., Spring Hill 34608	686-7587
James Walsh 21148 Marguerite Road, Brooksville 34601	754-8891
Jim Wiggins 15285 Brookridge Blvd., Brooksville 34613	596-3079
Joe Zuyus 2152 Meadow Lark Rd., Spring Hill 34608	683-0893