SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

FILED
Jul 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16521 (9)

1. Corporation Name
CITRUS COUNTY CHAPTER OF THE SOCIETY FOR THE PRE SERVATION AND ENCOURAGEMENT OF BARBER SHOP QUART

Principal Place of Business	Mailing Address
3373 S. ROYAL OAKS DR. UNIT 15-4 INVERNESS FL 34452 US	3373 S. ROYAL OAKS DR. UNIT 15-4 INVERNESS FL 34452 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/26/1986
3a. Date of Last Report: 02/06/1996

2. Principal Place of Business
21: INVERNESS, FL
22 Suite, Apt. #, etc.: SAME AS ABOVE
23 City & State:
24 Zip:
25 Country: CITRUS

2a. Mailing Address
26:
27 Suite, Apt. #, etc.: SAME AS ABOVE
28 City & State:
29 Zip:
30 Country: CITRUS

4. FEI Number: 59-2720565 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No

9. **Name and Address of Current Registered Agent**

HOWARD, T CROSS
3373 S ROYAL OAKS DR, UNIT 15-4
INVERNESS FL 34452

10. **Name and Address of New Registered Agent**

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: Howard T. Cross, TREASURER — 7/21/97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NANK, KEN 9140 EAST PUNT O' WOODS DRIVE INVERNESS FL	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD GABRIEL LANZANO 813 WINDY AVE. INVERNESS, FL 34452	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEMIEUX, ARTHUR 6366 E. MOCKINGBIRD LANE INVERNESS FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ROGERS, KENNETH W 1247 ESTATE POINT INVERNESS FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VD	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VICKERS, CHARLES 14040 BROOKRIDGE BLVD BROOKSVILLE FL	☑ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	JACK VALENTINE 6230 S. WOODLAND PT. FLORAL CITY, FL 34436	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SALTMARSH, JOHN 5720 S EATON TERR INVERNESS FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CROSS, HOWARD T 3373 S. ROYAL OAKS DRIVE UNIT 15-4 INVERNESS FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (4/97)

14. I do 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 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 REQUIRED 7/21/97 352-726-1077