

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90006 039 ****61.25

DOCUMENT # N17949

1. Entity Name

CHAUNCEY S. DANIEL POST 76, INC.



Principal Place of Business

1020 SKYLINE DRIVE
TAVARES FL 32778

Mailing Address

PO BOX 1115
TAVARES FL 32778



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6160820

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARTER, PATRICK R
1020 SKYLINE DRIVE
TAVARES FL 32778

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE DT ☐ Delete
NAME DODSON, BENJAMIN F
STREET ADDRESS 15595 SE 294TH TERRACE RD
CITY-ST-ZIP ALTOONA FL

TITLE V ☐ Delete
NAME NICHOLS, JAMES A
STREET ADDRESS 360 JUNIPER WAY
CITY-ST-ZIP TAVARES FL 32778

TITLE V ☒ Delete
NAME WEYENBERG, G W
STREET ADDRESS 2107 DAVID COURT
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE D ☐ Delete
NAME CLARK, ROBERT G
STREET ADDRESS 11217 FOUNTAIN LAKE BLVD
CITY-ST-ZIP LEESBURG FL 34788

TITLE D ☒ Delete
NAME VAUGHN, LEO
STREET ADDRESS 1060 FOREST DR
CITY-ST-ZIP TAVARES FL 32778

TITLE D ☐ Delete
NAME PAULSON, SHERWOOD G
STREET ADDRESS 5615 PRINCE ANDREW COURT
CITY-ST-ZIP LEESBURG FL 34748

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS FISH, CLINTON G.
CITY-ST-ZIP 3624 BAYSHORE CIR
TAVARES, FL 32778

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

Robert G. Clark
ROBERT G. CLARK, SECRETARY

Feb 8, 2006 (352) 243-2760