

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N19113 (2)

1. Corporation Name

TIME FOR FREEDOM, INC.



Principal Place of Business

Mailing Address

222 W BROADWAY
OCALA FL 34474
US

% GARY C. SIMONS
121 N.W. THIRD STREET
OCALA FL 34475
US

3. Date Incorporated or Qualified
02/05/1987

3a. Date of Last Report
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 22 23 24 25 26 27 28 29 30 222 SW Broadway Street

4. FEI Number

59-2771223

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 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

WRIGHT ROBERT, SECRETARY
1712 N. E. 40TH AVENUE
OCALA FL 34470

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 DPT
NAME DECASTRO, BERNARD F.
STREET ADDRESS 3750 S E 31ST TERR
CITY-ST-ZIP Ocala FL ☐ DELETE

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

TITLE D
NAME KLEIN, H. RANDOLPH
STREET ADDRESS 333 NW 3RD AVENUE
CITY-ST-ZIP Ocala FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CURINGTON, DAN
STREET ADDRESS 2985 N. E. 33 PL.
CITY-ST-ZIP Ocala FL ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CAPITANO, GREG
STREET ADDRESS 13700 SW 16 AVE
CITY-ST-ZIP Ocala FL ☐ DELETE

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

TITLE D
NAME CHAZAL, CHARLES
STREET ADDRESS 5981 SE 5 PL
CITY-ST-ZIP Ocala FL ☐ DELETE

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

TITLE D
NAME FRICK, FRANCIS M.
STREET ADDRESS 5108 SE 7TH PLACE
CITY-ST-ZIP Ocala FL ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Bernard F. Decastro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Bernard F. Decastro

4/25/96 (352) 351-1280

Date Daytime Phone #

CR2E037 (12/95)