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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N20466** (1)

1. Corporation Name

ZEPHYRHILLS GRANGE, NO. 194 INC.



Principal Place of Business	Mailing Address
SENIOR CENTER 35046 GLOSSOM CR ZEPHYRHILLS FL 33540 US	5138 WOOD ST. 35046 GLOSSOM CR ZEPHYRHILLS FL 33541 US

3. Date Incorporated or Qualified
05/04/1987

4. FEI Number
23-7215492

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

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

2. Principal Place of Business	2a. Mailing Address
21 AMERICAN LEGION HALL Suite, Apt. #, etc. 22 8TH STREET City & State 23 ZEPHYRHILLS, FL Zip 24 33540 Country 25 PASCO	26 4832 SEDENO DRIVE Suite, Apt. #, etc. 27 City & State 28 ZEPHYRHILLS, FLORIDA Zip 29 33541 Country 30 PASCO

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RISING, MARIE N.
5138 WOOD STREET
ZEPHYRHILLS FL 33541

81 Name	B. FRANKLIN HAYES
82 Street Address (P.O. Box Number is Not Acceptable)	4832 SEDENO DRIVE
83	
84 City	ZEPHYRHILLS FL
85 Zip Code	33541

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 **B. Franklin Hayes - SECRETARY - FEB 10, 1998**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	MASTER - P. VIRGINIA L. HAYES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARKS, GORDON	1.2 NAME	VIRGINIA L. HAYES
STREET ADDRESS	35046 GLOSSOM CR	1.3 STREET ADDRESS	4832 SEDENO DRIVE
CITY-ST-ZIP	ZEPHYRHILLS FL	1.4 CITY-ST-ZIP	ZEPHYRHILLS, FL 33541
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	SECRETARY - S. B. FRANKLIN HAYES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARKS, DOROTHY	2.2 NAME	B. FRANKLIN HAYES
STREET ADDRESS	35046 GLOSSOM CIR.	2.3 STREET ADDRESS	4832 SEDENO DRIVE
CITY-ST-ZIP	ZEPHYRHILLS FL	2.4 CITY-ST-ZIP	ZEPHYRHILLS, FL 33541
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	DIRECTOR - D. PAUL LISTER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STURTEVANT, BEATRICE	3.2 NAME	PAUL LISTER
STREET ADDRESS	6825 LUM DR.	3.3 STREET ADDRESS	2153 L - MATADOR
CITY-ST-ZIP	ZEPHYRHILLS FL	3.4 CITY-ST-ZIP	ZEPHYRHILLS-FL 33541
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	DIRECTOR - D. GORDON PARKS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOKEE, BERNICE	4.2 NAME	GORDON PARKS
STREET ADDRESS	122 EMORY DRIVE	4.3 STREET ADDRESS	35046 GLOSSOM CIR
CITY-ST-ZIP	ZEPHYRHILLS FL	4.4 CITY-ST-ZIP	ZEPHYRHILLS FL 33541
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	DIRECTOR - D. GILBERT HILL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYES, B. FRANKLIN	5.2 NAME	GILBERT HILL
STREET ADDRESS	4832 SEDENO DR.	5.3 STREET ADDRESS	6801 RIDGEWOOD DRIVE
CITY-ST-ZIP	ZEPHYRHILLS FL	5.4 CITY-ST-ZIP	ZEPHYRHILLS FL 33541
TITLE	S <input checked="" type="checkbox"/> DELETE	6.1 TITLE	
NAME	RISING, MARIE N.	6.2 NAME	
STREET ADDRESS	5138 WOOD STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL	6.4 CITY-ST-ZIP	

14. I 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: **B. Franklin Hayes**

FEB 10, 1998 - 813-783-7722

CR2E037 (1097)