

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
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95 MAY -1 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N21028 (8)

1. Corporation Name

DADE BATTLEFIELD SOCIETY, INC.

Principal Place of Business

BATTLEFIELD DR.
P.O. BOX 309
BUSHNELL FL 33513-7309

Mailing Address

BATTLEFIELD DR.
P.O. BOX 309
BUSHNELL FL 33513-7309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1987

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2820082

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

MANN, SHEILA
HIGHWAY 301 NORTH
BUSHNELL FL 33513

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	MANN, SHEILA
STREET ADDRESS	HIGHWAY 301 NORTH
CITY - ST - ZIP	BUSHNELL FL
TITLE	D
NAME	DEHART, JASON
STREET ADDRESS	RT. 1
CITY - ST - ZIP	OXFORD FL
TITLE	D
NAME	LAUMER, FRANK
STREET ADDRESS	35247 REYNOLDS
CITY - ST - ZIP	DADE CITY FL
TITLE	T
NAME	ALLEN, CHARLENE
STREET ADDRESS	ROUTE 3, BOX 233F
CITY - ST - ZIP	BUSHNELL FL
TITLE	D
NAME	GIRON, RAYMOND
STREET ADDRESS	P.O. BOX 316 N/A
CITY - ST - ZIP	MCINTOSH FL
TITLE	VS
NAME	MONTGOMERY, JEFFERY J
STREET ADDRESS	12346 S. IRIS PT.
CITY - ST - ZIP	FLORAL CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☒ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	33513
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☒ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	33525
41 TITLE	☐ Change ☒ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	33513
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☒ Change ☒ Addition
62 NAME	Montgomery, Jeffrey J.
63 STREET ADDRESS	
64 CITY - ST - ZIP	34426

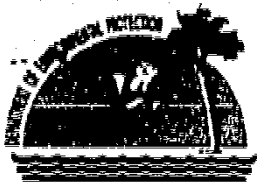
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate 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:

Jeffrey J. Montgomery
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/95

754-6777
904-6777



N21028

Department of Environmental Protection

Lawton Chiles
Governor

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Virginia B. Wetherell
Secretary

May 1, 1995

Mr. David Mann, Director
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Dear Mr. Mann:

This letter is to certify to you that the Friends of Dade Battlefield Society, Inc. is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S.

Sincerely,

Fran P. Mainella, CLP
Director
Division of Recreation and Parks

FPM/pwc

RECEIVED
95 MAY -1 PM 2:54
DIRECTOR
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA