FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 24 AM 11:33

DOCUMENT # N21323 (3)

1. Corporation Name
HARRY-ANNA CHARITIES, INC.

Principal Place of Business	Mailing Address
C/O FRANK D. WILLIS, JR. 635 UMATILLA BLVD. UMATILLA FL 32784	C/O FRANK D. WILLIS, JR. 635 UMATILLA BLVD. UMATILLA FL 32784

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/25/1987
3a. Date of Last Report: 02/01/1994
4. FEI Number: 59-2825884 ☐ 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	2a. Mailing Address
21	26 P.O. Box 49
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 Umatilla, Fl
24 Zip / 25 Country	29 32784-0049 / 30 U.S.A.

9. Name and Address of Current Registered Agent

WILLIS, FRANK D., JR.
635 UMATILLA BLVD.
UMATILLA FL 32784

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D	☒ Change ☐ Addition
NAME	CALLAHAM, AUBREY †	12 NAME	CALLAHAM, AUBREY L	
STREET ADDRESS	PO BOX 494 N/A	13 STREET ADDRESS	3529 STRATFORD LANE	
CITY-ST-ZIP	MILTON FL	14 CITY-ST-ZIP	PACE FL	
TITLE	D	21 TITLE	D	☒ Change ☐ Addition
NAME	PRIDE, CHARLES M	22 NAME	BROWN, BEN S JR.	
STREET ADDRESS	1651 SHERWOOD ST	23 STREET ADDRESS	215 LAKEVIEW ST	
CITY-ST-ZIP	CLEARWATER FL	24 CITY-ST-ZIP	UMATILLA FL	
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	WILLIS, FRANK D., JR.	32 NAME		
STREET ADDRESS	635 UMATILLA BLVD	33 STREET ADDRESS		
CITY-ST-ZIP	UMATILLA FL	34 CITY-ST-ZIP		
TITLE	VD	41 TITLE		☐ Change ☐ Addition
NAME	HENLEY, WM. LARRY	42 NAME		
STREET ADDRESS	3439 MERRIMAC DR	43 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	MCCALL, WILLIS V.	52 NAME	DOMINIANNI, GEORGE	
STREET ADDRESS	19001 WILLIS V MCCALL RD	53 STREET ADDRESS	142 FOSTER LANE	
CITY ST ZIP	UMATILLA FL	54 CITY ST ZIP	PALM COAST FL	
TITLE	PD	61 TITLE		☐ Change ☐ Addition
NAME	SHASHY, RICHARD M	62 NAME		
STREET ADDRESS	3804 NE 19TH ST CIR	63 STREET ADDRESS		
CITY-ST-ZIP	OCALA FL	64 CITY ST ZIP		

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)(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: Frank D. Willis, Jr., Secretary — 2-16-95 — (904) 669-2241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000274