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FILED

Apr 30 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

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 32784P O BOX 49  
UMATILLA FL 32784-0049  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified  
06/25/19873a. Date of Last Report  
02/29/19964. FEI Number  
59-2825884Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida StatutesYes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

TITLE	D- <input checked="" type="checkbox"/> DELETE
NAME	CALLAHAN, AUBREY I
STREET ADDRESS	3520 STRATFORD LANE
CITY - ST - ZIP	PACE FL
TITLE	D <input type="checkbox"/> DELETE
NAME	BROWN, BEN S JR
STREET ADDRESS	215 LAKEVIEW ST
CITY - ST - ZIP	UMATILLA FL
TITLE	S <input type="checkbox"/> DELETE
NAME	WILLIS, FRANK D JR.
STREET ADDRESS	635 UMATILLA BLVD
CITY - ST - ZIP	UMATILLA FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	HENLEY, WM. LARRY
STREET ADDRESS	3439 MERRIMAC DR
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	D <input type="checkbox"/> DELETE
NAME	DOMINIANNI, GEORGE
STREET ADDRESS	142 FOSTER LANE
CITY - ST - ZIP	PALM COAST FL
TITLE	PD <input type="checkbox"/> DELETE
NAME	SHASHY, RICHARD M
STREET ADDRESS	3804 NE 19TH ST CIR
CITY - ST - ZIP	OCALA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VERGASON, DAVID E.
1.3 STREET ADDRESS	108 61st STREET E.
1.4 CITY - ST - ZIP	PALMETO, FL 34221
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	32784
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	32784
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	32312
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	32137
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	32670

14. I do 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:

FRANK D. WILLIS, JR 4-23-97 352-664-2241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0015234

CR2E037 (9/96)