

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **N23407**

(2)

1. Corporation Name

**POLK CITY GRANGE, NO. 212 INC.**



Principal Place of Business

**C/O MENDELSON  
608 ESTRADA LANE  
POINCIANA FL 34758**

Mailing Address

**C/O MENDELSON  
608 ESTRADA LANE  
POINCIANA FL 34758**

3. Date Incorporated or Qualified  
**11/10/1987**

3a. Date of Last Report  
**02/22/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
**59-2969222**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

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

City & State

City & State

23

28

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

Zip

Country

Zip

Country

24

25

29

30

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

**MENDELSON, PAULINE W  
608 ESTRADA LANE  
POINCIANA FL 34758**

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 state if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **JEWETT, KENNETH**  
STREET ADDRESS **40 DALE DR**  
CITY-ST-ZIP **WINTER HAVEN FL**

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

TITLE **VPD** ☒ DELETE  
NAME **MC HENRY, SHARON**  
STREET ADDRESS **304 BENSON ST.**  
CITY-ST-ZIP **VALRICO FL 33594**

2.1 TITLE **VPD** ☒ Change ☒ Addition  
2.2 NAME **HUNT, EDWARD**  
2.3 STREET ADDRESS **752 N CITRUS GROVE BLVD**  
2.4 CITY-ST-ZIP **POLK CITY, FL 33868**

TITLE **SD** ☐ DELETE  
NAME **MENDELSON, PAULINE**  
STREET ADDRESS **608 ESTRADA LANE**  
CITY-ST-ZIP **POINCIANA FL 34758**

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

TITLE **D** ☒ DELETE  
NAME **MC HENRY, GARLAND**  
STREET ADDRESS **304 BENSON ST**  
CITY-ST-ZIP **VALRICO FL**

4.1 TITLE **D** ☒ Change ☐ Addition  
4.2 NAME **WILMOT, MARY**  
4.3 STREET ADDRESS **616 CITRUS GROVE BLVD**  
4.4 CITY-ST-ZIP **POLK CITY, FL 33868**

TITLE **D** ☒ DELETE  
NAME **COY, JACQUELINE**  
STREET ADDRESS **728 N CITRUS GROVE BLVD**  
CITY-ST-ZIP **POLK CITY FL**

5.1 TITLE **D** ☒ Change ☐ Addition  
5.2 NAME **BENEDICT, IRMA**  
5.3 STREET ADDRESS **2731 AVE T, N.W.**  
5.4 CITY-ST-ZIP **WINTER HAVEN, FL 33881**

TITLE **T** ☐ DELETE  
NAME **MENDELSON, EDWARD**  
STREET ADDRESS **608 ESTRADA LN**  
CITY-ST-ZIP **POINCIANA FL**

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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)(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:

*Pauline W Mendelson, Sec.*  
Pauline W Mendelson, Secretary

4/26/96 407-933-51  
Daytime Phone

CR2E037 (12/95)