# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Mar 27, 2001 8:00 am**
**Secretary of State**
03-06-2001 90298 004 ****61.25

DOCUMENT # N23407

1. Entity Name

POLK CITY GRANGE, NO. 212 INC.

| Principal Place of Business | Mailing Address |
|---|---|
| BETTY HUNT<br>POLK CITY FL 33868<br>US | 752 N CITRUS GROVE BLVD<br>POLK CITY FL 33868<br>US |

- 32083

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| BETTY HUNT<br>Suite, Apt. #, etc. | 752 N CITRUS GROVE BLVD<br>Suite, Apt. #, etc. |
| City & State: POLK CITY FL ~~33868~~ | City & State: POLK CITY ~~33868~~ |
| Zip: 33868 Country: POLK | Zip: 33868 Country: POLK |

4. FEI Number 59-2969222 ☒ Applied For ☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

HUNT, BETTY
752 N CITRUS GROVE BLVD
POLK CITY FL 33868

**7. Name and Address of New Registered Agent**

Name: BETTY HUNT
Street Address (P.O. Box Number is Not Acceptable): 752 N. CITRUS GROVE BLVD
POLK
City: POLK CITY FL Zip Code: 33868

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: BETTY HUNT Betty Hunt 1-7-2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| **FILE NOW: FEE IS $61.25** | 9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees | **Make Check Payable to Department of State** |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>MAYNARD, KENNETH<br>9451 YOYLES LOOP<br>POLK CITY FL 33886 | ☒ Delete | PRES HUNT MASTER<br>752 N. CITRUS GROVE BLVD<br>POLK CITY FL<br>33863 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>NEFF, KRIS<br>752 N CITRUS GROVE BLVD<br>POLK CITY FL 33868 | ☒ Delete | V PRES EVELYN AKIN<br>5339 GRIMES RD<br>POLK CITY FL<br>OVERSEER 33868 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>HUNT, BETTY<br>752 N CITRUS GROVE BLVD<br>POLK CITY FL 33886 | ☐ Delete | SD<br>HUNT BETTY<br>752 NORTH CITRUS GROVE BLVD<br>POLK CITY FL 33868 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>ARNOLD, HELEN<br>PO BOX 296<br>EATEN PARK FL 33840 | ☒ Delete | D TREASUER<br>HELEN BAILEY<br>4130 VINSON RD<br>LAKELAND FL 33810 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>KIRBY, JESSIE<br>4350 BRIARWOOD CIR NW<br>AUBURNDALE FL 33823 | ☐ Delete | D<br>KIRBY JESSIE<br>4350 BRIARWOOD CIR NW<br>AUBURNDALE FL 33823 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>COY, DILLARD<br>728 CITRUS CIR<br>POLK CITY FL | ☒ Delete | D DENNIS AKIN<br>5339 GRIMES RD.<br>POLK CITY FL<br>EX COMMITTEE 33868 | ☒ Change ☐ Addition |

CR2E037 (10/00)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty Hunt SIGNATURE REQUIRED 3-1-2001 863-984-2886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #