


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90034 029 \*\*\*\*61.25

<b>DOCUMENT # N23407</b>			
1. Entity Name <b>POLK CITY GRANGE, NO. 212 INC.</b>			
Principal Place of Business <b>BETTY HUNT POLK CITY FL 33868 US</b>		Mailing Address <b>752 N CITRUS GROVE BLVD POLK CITY FL 33868 US</b>	
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent  <b>HUNT, BETTY 752 N CITRUS GROVE BLVD POLK CITY FL 33868</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	



MOORE CR2E037 (11/03)

4. FEI Number **59-2969222** Applied For  
Not Applicable

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Betty Hunt DATE 3-29-04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PPEO HUNT, MASTER 752 N. CITRUS GROVE BLVD POLK CITY FL 33863</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPD JEWETT, KENNETH PO BOX 4043 OVERSEERINZER HAVEN FL 33885</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>KRISTOPHER NEFF</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>752 N. CITRUS GROVE BLVD POLK CITY FL 33868</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SD HUNT, BETTY 752 N CITRUS GROVE BLVD POLK CITY FL 33868</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DT BAILEY, HELEN 4130 VINSON RD LAKELAND FL 33810</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>JANET MCPHERSON</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>230 CARTER POLK CITY FL 33868</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D KIRBY, JESSIE 4350 BRIARWOOD CIR NW AUBURNDAL FL 33823</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D STEWART-NEFF, KRISTOPHER 752 N. CITRUS GROVE BLVD. POLK CITY FL 33868</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>LEVARO MCMAHLE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>522 SUNSHINE POLK CITY FL 33868</b>

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-04-863-984-2986  
Date Daytime Phone #