

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 # **N25144** (9)

1. Corporation Name

COUNCIL OF CONCERNED CITIZENS, INC.



Principal Place of Business

Mailing Address

2250 US 90 W
P.O. BOX 333
LAKE CITY FL 32056

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P.O. BOX 333
LAKE CITY FL 32056

3. Date Incorporated or Qualified
03/02/1988

3a. Date of Last Report
06/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-2868170

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22

27

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

City & State

City & State

23

28

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DICKS, LENVIL H.
2250 US 90 WEST
LAKE CITY FL 32055**

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	DP	<input type="checkbox"/> DELETE
NAME	DICKS, LENVIL	
STREET ADDRESS	HIGHWAY 90 WEST	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	JONES, GLENN	
STREET ADDRESS	2200 EAST DUVAL STREET	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	TOMPKINS, EARL	
STREET ADDRESS	4 DOGWOOD CIRCLE	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BULLARD, AUDREY	
STREET ADDRESS	201 N. MARION ST.	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PERSONS, JOSEPH	
STREET ADDRESS	PUEBLO COURT	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VANN, SAM	
STREET ADDRESS	324 EVERGREEN AVENUE	
CITY - ST - ZIP	LAKE CITY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

Lenvil H. Dicks, Pres. 3/22/96

DATE

DAYTIME PHONE #

(904) 752-8575

CR2E037 (12/95)