

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 PM 1:32

DOCUMENT # N34283 (4)

1. Corporation Name

THE WEST PASCO ROSE SOCIETY, INC.

Principal Place of Business

Mailing Address

13805 SAN JUAN AVE
HUDSON FL 34667
US

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HUDSON FL 34667
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/21/1989
3a. Date of Last Report 02/07/1994

4. FEI Number 59-2908800
Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

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

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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required

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

LARAWAY, ERMA Z
13805 SAN JUAN AVE
HUDSON FL 34667

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Erma Z. Laraway, President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required with filing)

DATE 2-4-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME LARAWAY, ERMA Z
STREET ADDRESS 13805 SAN JUAN AVE
CITY-ST-ZIP HUDSON FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE VPS
NAME DIORIO, RUTH
STREET ADDRESS 5707 DALTON CT
CITY-ST-ZIP NEW PORT RICHEY FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE VP
NAME MOORE, ROBERT
STREET ADDRESS 12107 PAWNEE DR
CITY-ST-ZIP BAYONET POINT FL

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Vice President- 2nd
Albert Krieg
6039 7th Ave.
New Port Richey, FL 34668

TITLE D
NAME TINGLER, JACK
STREET ADDRESS 9108 MILLERS POND AVE
CITY-ST-ZIP NEW PORT RICHEY FL

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Director
Joan Waters
4645 Weasel Drive
New Port Richey, FL 34653

TITLE T
NAME CADIEUX, PHILLIP
STREET ADDRESS 13211 BLUE WATER COURT
CITY-ST-ZIP HUDSON FL

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Treasurer
Hubert Claeys
4603 Sandpoint Drive
New Port Richey, FL 34655

TITLE D
NAME WEAVER, JOHN
STREET ADDRESS 9312 LAKE CHRISTINA LANE
CITY-ST-ZIP PORT RICHEY FL

6.1 TITLE ☐ Change ☐ 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Erma Z. Laraway, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Erma Z. Laraway

2/3/95 813-863-4801