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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N34773** (4)

1. Corporation Name

**BOYS' AND GIRLS' CLUB OF PERRY/TAYLOR COUNTY, FL
ORIDA, INC.**

Principal Place of Business

Mailing Address

% GREGORY S. PARKER
202 E JULIA DR
PERRY FL 32347
US

% GREGORY S. PARKER
P O BOX 1474
PERRY FL 32348-7474
US

3. Date Incorporated or Qualified
10/18/1989

3a. Date of Last Report
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2973927

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

PARKER, GREGORY S.
411 N WASHINGTON ST
PERRY FL 32347

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **DP**
STREET ADDRESS **SIMMONS, DAN**
CITY-ST-ZIP **RT 3 BOX 260**
PERRY FL 32347

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DVP**
STREET ADDRESS **GUNTER, DARYLL**
CITY-ST-ZIP **RT 3 BOX 187**
PERRY FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **DP**
STREET ADDRESS **GREENE, EARLE**
CITY-ST-ZIP **176 LANDRY ROAD**
PERRY FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☒ DELETE

NAME **DVP**
STREET ADDRESS **RIGONI, PAM**
CITY-ST-ZIP **324 GLENRIDGE ROAD**
PERRY FL

4.1 TITLE ☐ Change ☒ Addition

TITLE ☒ DELETE

NAME **SD**
STREET ADDRESS **ECKEL, PEGGY**
CITY-ST-ZIP **P.O. BOX 717 NA**
PERRY FL 32347

5.1 TITLE ☐ Change ☒ Addition

TITLE ☐ DELETE

NAME **DT**
STREET ADDRESS **DICKERT, GALE**
CITY-ST-ZIP **411 PLANTATION ROAD**
PERRY FL 32347

6.1 TITLE ☐ Change ☐ Addition

14. I do 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 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

4.15.97

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