

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 21 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N37316 (9)**  
1. Corporation Name  
**SPRING HILL CHAPTER OF RARE FRUIT COUNCIL INTERNATIONAL, INC.**

Principal Place of Business <b>13090 CENTENNIAL STREET SPRINGHILL FL 34609 US</b>	Mailing Address <b>13090 CENTENNIAL STREET SPRING HILL FL 34609-1421 US</b>
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<b>21</b> Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	<b>26</b> Mailing Address Suite, Apt. #, etc. City & State Zip Country
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<b>3.</b> Date Incorporated or Qualified <b>03/28/1990</b>	<b>3a.</b> Date of Last Report <b>03/27/1996</b>
<b>4.</b> FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**  
**RATAJIK, ANN**  
**13090 CENTENNIAL STREET**  
**SPRING HILL FL 34609**

**10. Name and Address of New Registered Agent**  
**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	ZOEHRRER, LOUIS	
STREET ADDRESS	12333 GLEN HAVEN ST	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	RATAJIK, ANN	
STREET ADDRESS	11290 COUNTRYWOOD COURT	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	ZOEHRRER, MARGARET	
STREET ADDRESS	12333 GLEN HAVEN ST	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	PERKINS, DENNIS	
STREET ADDRESS	8088 SPANISH OAK DR	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	FREDERICK, EDWARD	
STREET ADDRESS	11290 COUNTRYWOOD COURT	
CITY-ST-ZIP	SPRINGHILL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ROSS JR, ANDREW	
STREET ADDRESS	9909 E LAKE TAHOE DRIVE	
CITY-ST-ZIP	VERNESS FL	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	D/P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	PERNA CHUCK	
1.3 STREET ADDRESS	5015 CHAMBERS CT	
1.4 CITY-ST-ZIP	SPRING HILL, FL 34609	
2.1 TITLE	D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	RATAJIK ANN	
2.3 STREET ADDRESS	13090 CENTENNIAL ST	
2.4 CITY-ST-ZIP	SPRING HILL, FL 34609	
3.1 TITLE	D/V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	LORRAINE RITTER	
3.3 STREET ADDRESS	102 F3 BEDFORD RD	
3.4 CITY-ST-ZIP	SPRING HILL, FL 34609	
4.1 TITLE	D/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	PERKINS GISELLE	
4.3 STREET ADDRESS	8088 SPANISH OAK DR	
4.4 CITY-ST-ZIP	SPRING HILL, FL 34609	
5.1 TITLE	D/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	FREDERICK, EDWARD	
5.3 STREET ADDRESS	13090 CENTENNIAL ST	
5.4 CITY-ST-ZIP	SPRING HILL FL 34609	
6.1 TITLE	D/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	BUCK, CALVIN	
6.3 STREET ADDRESS	2245 BISHOP RD	
6.4 CITY-ST-ZIP	SPRING HILL, FL 34609	

**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.

CP2E037 (9/96)