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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N41047

1. Corporation Name

ARC MARION-NEW HOPE FOUNDATION, INC.

Principal Place of Business

2800 SE MARICAMP RD.
OCALA FL 34471-5538

Mailing Address

2800 SE MARICAMP RD.
OCALA FL 34471-5538



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

11/28/1990

4. FEI Number

59-3246094

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

9. Name and Address of Current Registered Agent

MCDONALD, KENNETH P
2800 SE MARICAMP RD
OCALA FL 34471

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

Kenneth P. McDonald, Exec. Dir.

4/29/99

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 **P** ☐ DELETE

NAME **HANCHER, IRENE**
STREET ADDRESS **1926 SE 37TH CT CIR**
CITY-ST-ZIP **OCALA FL 34471**

TITLE **D** ☒ DELETE

NAME **WALIGA, JOSEPH W**
STREET ADDRESS **1970 SE 32ND LANE**
CITY-ST-ZIP **OCALA FL 34471**

TITLE **ST** ☒ DELETE

NAME **PEEK, DAVID H**
STREET ADDRESS **1609 GULF LIFE TOWER**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **VP** ☒ DELETE

NAME **WILDY, HELEN C.**
STREET ADDRESS **614 N.E. 45TH CT.**
CITY-ST-ZIP **OCALA FL**

TITLE **V** ☒ DELETE

NAME **WILDY, HELEN C**
STREET ADDRESS **614 NE 45TH COURT**
CITY-ST-ZIP **OCALA FL 34471**

TITLE **D** ☒ DELETE

NAME **WALIGA, JOSEPH**
STREET ADDRESS **1970 S.E. 32ND LANE**
CITY-ST-ZIP **OCALA FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

SEE ATTACHED LIST OF NEW
DIRECTORS

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Irene Hancher, President

Date

Daytime Phone #

CR2E037 (1/98)

535425-90142-43

N41047

OFFICERS AND DIRECTORS
ARC MARION – NEW HOPE FOUNDATION, INC.

Mrs. Irene S. Hancher, President
1926 SE 37th Ct. Cir.
Ocala, Fl 34471

Mrs. Lillian Waliga
1970 SE 32nd Lane
Ocala, Fl 34471

Mr. William E. Chambers Jr.
1430 SE 5th Street
Ocala, Fl 34471

Mr. Kenneth McDonald
2800 SE Maricamp Road
Ocala, Fl 34471