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Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44272 (5)

1. Corporation Name

RUBONIA COMMUNITY CENTER, INC.



Principal Place of Business

Mailing Address

1309 72ND ST CT E
RUBONIA FL 34221P. O. BOX 8800
PALMETTO FL 34220-88003. Date Incorporated or Qualified
07/12/19913a. Date of Last Report
03/08/1996

2. Principal Place of Business

2a. Mailing Address

21 1309 72nd ST E

Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 PALMETTO, FL

23 Zip

Country

28 34221

Zip

Country

24

25

29

30

4. FEI Number
65-0282384Applied For
Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. 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

GORDON, JAMES O SR
1203 71ST STREET, EAST
RUBONIA FL 34221

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 P
NAME GALLE, ROGER C
STREET ADDRESS 807 67TH AV. TERR. W
CITY-ST-ZIP BRADENTON FL 34207☐ DELETE11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP☐ Change☐ AdditionTITLE D
NAME MATTHEWS, JACKIE
STREET ADDRESS 1017 7TH ST W
CITY-ST-ZIP BRADENTON FL☒ DELETE21 TITLE D
22 NAME HAYES, Rutha
23 STREET ADDRESS 1512 71 ST. E
24 CITY-ST-ZIP Rubonia, FL 34221☒ Change☒ AdditionTITLE D
NAME BOSTON, BILLY
STREET ADDRESS 1311 72ND STREET CT., E.
CITY-ST-ZIP RUBONIA FL 34220☒ DELETE31 TITLE D
32 NAME Helmer, George
33 STREET ADDRESS P.O. Box 96
34 CITY-ST-ZIP PALMETTO, FL 34221☒ Change☐ AdditionTITLE S
NAME JAMES, ELAINE
STREET ADDRESS P.O. BOX 8747
CITY-ST-ZIP RUBONIA FL 34220☐ DELETE41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP☐ Change☐ AdditionTITLE D
NAME BURGER, BILL
STREET ADDRESS P.O. BOX 201
CITY-ST-ZIP TERRA CEIA FL 34205☐ DELETE51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP☐ Change☐ AdditionTITLE D
NAME ENNEKING, BILL
STREET ADDRESS 755 TERRA CEIA ROAD
CITY-ST-ZIP TERRA CEIA FL 34250☐ DELETE61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP☐ 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: *[Signature]* Executive Director 1/19/97 (941) 729-8397

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0062230

CR2E037 (9/96)