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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N49509

(5)

1. Corporation Name

COUNTRYSIDE CHARITIES, INC.

Principal Place of Business

PO BOX 14006  
CLEARWATER FL 34629-4006

Mailing Address

PO BOX 14006  
CLEARWATER FL 34629-4006

3. Date Incorporated or Qualified  
06/23/1992

3a. Date of Last Report  
03/02/1995

2. Principal Place of Business

2a. Mailing Address

21 28100 U.S. Hwy 19 North

26 28100 U.S. Hwy 19 North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 504

27 Suite 504

City & State

City & State

23 Clearwater, FL

28 Clearwater, FL

Zip

Country

Zip

Country

24 34621

25 U.S.A.

29 34621

30 U.S.A.

4. FEI Number

59-3173171

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

SOROTA, JOSEPH J JR  
28100 US HWY 19 N  
SUITE 504  
CLEARWATER FL 34621

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

TITLE D ☐ DELETE  
NAME CHRIST, JOHN P.D.  
STREET ADDRESS 701 ENTERPRISE RD. E STE 302  
CITY-ST-ZIP SAFETY HARBOR FL

TITLE PD ☐ DELETE  
NAME SULLIVAN, ROY  
STREET ADDRESS 315 W M L KING DR  
CITY-ST-ZIP TARPON SPRINGS FL

TITLE STD ☐ DELETE  
NAME SOROTA, JOSEPH J JR  
STREET ADDRESS 28100 US HWY 19 N, SUITE 504  
CITY-ST-ZIP CLEARWATER FL

TITLE D ☒ DELETE  
NAME RODNITE, JR. A  
STREET ADDRESS PO BOX 1019 N/A  
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE  
NAME GOODMAN, MARIAN  
STREET ADDRESS 4685 WRENTHAM PL  
CITY-ST-ZIP PALM HARBOR FL

TITLE VPD ☐ DELETE  
NAME PARKER, WILLIAM M  
STREET ADDRESS 710 E LAKE DR  
CITY-ST-ZIP TARPON SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME Crist, John P.D.  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE D ☒ Change ☐ Addition  
4.2 NAME Hicks, Robert W.  
4.3 STREET ADDRESS 28100 U.S. Hwy 19 North, Suite 500  
4.4 CITY-ST-ZIP Clearwater, FL 34621

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Joseph J. Sorota, Jr.*

Joseph J. Sorota, Jr., Director 4/9/96 (813)796-1557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

2 of 2

**ADDITIONAL DIRECTOR FOR  
COUNTRYSIDE CHARITIES, INC.**

D  
Williams, Robert L.  
30798 U.S. Hwy 19 North  
Palm Harbor, FL 34684