

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000001766 (4)

1. Corporation Name

CITIZENS FOR RESPONSIVE GOVERNMENT, INC.



Principal Place of Business

41 N. JEFFERSON ST., SUITE 111
PENSACOLA FL 32501

Mailing Address

P.O. BOX 1493
PENSACOLA FL 32597

3. Date Incorporated or Qualified
04/08/1994

3a. Date of Last Report
03/17/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3282652

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

HUGHES, FRANK S
41 N. JEFFERSON ST., SUITE 111
PENSACOLA FL 32501

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

1.1 TITLE ☐ Change ☐ Addition

NAME
HUGHES, FRANK S
STREET ADDRESS
4839 D'EVEREUX CIRCLE
CITY-ST-ZIP
PENSACOLA FL 32504

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME
MCCARTHY, FRANK H
STREET ADDRESS
2371 BERRYDALE ROAD
CITY-ST-ZIP
PENSACOLA FL 32534

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME
TAYLOR, GLORIA B
STREET ADDRESS
7637 BROOK FOREST WAY
CITY-ST-ZIP
PENSACOLA FL 32514

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME
HUGHES, JOAN C
STREET ADDRESS
4839 D'EVEREUX CIRCLE
CITY-ST-ZIP
PENSACOLA FL 32504

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
TAYLOR, RODNEY K
STREET ADDRESS
7637 BROOK FOREST WAY
CITY-ST-ZIP
PENSACOLA FL 32514

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
VOLZ, DAVID
STREET ADDRESS
1750 YATES AVENUE
CITY-ST-ZIP
PENSACOLA FL 32503

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:

Frank S. Hughes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 904 4327157
Date Daytime Phone #

CR2E037 (12/95)