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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000002696 (2)**

1. Corporation Name

**HISPANIC INTERNAL REVENUE EMPLOYEES (HIRE), JACK
SONVILLE DISTRICT, INC.**

Principal Place of Business

**956 LEBRUN DR
JACKSONVILLE FL 32205
US**

Mailing Address

**P.O. BOX 4185
JACKSONVILLE FL 32201
US**

3. Date Incorporated or Qualified

05/26/1994

4. FEI Number

59-3228019

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**ERIKA ANGULO-VAZQUEZ
7537 PHEASANT RUN DRIVE
JACKSONVILLE FL 32244**

10. Name and Address of New Registered Agent

81 Name

Vernon Armstrong

82 Street Address (P.O. Box Number is Not Acceptable)

956 Le Brun Drive

83

84 City

Jacksonville

FL

85 Zip Code

32205

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, 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

Vernon Armstrong

Vernon Armstrong

1-29-98

(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 ☒ DELETE

NAME

**PD
ANGULO-VAZQUEZ, ERIKA
7537 PHEASANT RUN DRIVE
JACKSONVILLE FL**

CITY-ST-ZIP

TITLE ☒ DELETE

NAME

**VD
ARMSTRONG, VERNON
956 LEBRUN DRIVE
JACKSONVILLE FL**

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

**T
ALAMO-TIRADO, IVETTE
3737 ST. JOHNSA BLUFF APT#109
JACKSONVILLE FL**

CITY-ST-ZIP

TITLE ☒ DELETE

NAME

**S
MARRERO, GLADY
8880 OLD KINGS RD S APT 106 W
JACKSONVILLE FL**

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

**PD
Vernon Armstrong
956 Le Brun Drive
Jacksonville, FL. 32205**

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

**VD
Marrero, Gladys
1304 Independence Drive
Orange Park, FL. 32065**

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

**T
Alamo-Tirado, Ivette
9684 Primrose Rd E
Jacksonville, FL. 32257**

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

**S
Jones, Sonja
5231 Oxford Gable Lane West
Jacksonville, FL 32257**

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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 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:

Vernon Armstrong

Vernon Armstrong

1-29-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0004149

CR2E037 (10/97)