SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $000)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED
1995 JUN 20 PM 2:33

DOCUMENT # **N94000002849 (7)**

1. Corporation Name

HAINES CITY MERCHANTS AND BUSINESS ASSOCIATION, INC.

100001519131
-06/21/95--01038--023
****155.00 ****155.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
12 N. 5TH ST. HAINES CITY FL 33844	12 N. 5TH ST. HAINES CITY FL 33844

3. Date Incorporated or Qualified: 06/03/1994
3a. Date of Last Report:
4. FEI Number: 59-3252089 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 12 n 5TH Street	2a. Mailing Address 26 P.O. Box 2009
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Haines City, FL	City & State 28 Haines City, FL
Zip / Country 24 33844 / 25 Polk	Zip / Country 29 33845 / 30 Polk

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **FILING FEE IS $61.25**
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
VANDIVER, FRANCES 12 N. 5TH ST. HAINES CITY FL 33844	81 Name: Same 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: Frances Vandiver President 6/13/95
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VANDIVER, FRANCES 12 N. 5TH ST. HAINES CITY FL 33844	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HIRNEISEN, RICHARD N/A 1 MANATEE AVE. DAVENPORT FL 33837	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☒ Change ☐ Addition Dorothy Klemm 1013 Lake Street Haines City, FL 33844
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BULLOCK, KATHLYN 702 JONES AVE. HAINES CITY FL 33844	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COOK, MAXINE 1007 SURRY ST. HAINES CITY FL 33844	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition SCC 6-20-95

CR2E037 (3/95)

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)(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: Frances Vandiver FRANCES VANDIVER 6/13/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date
941-421-1958
Daytime Phone #

0014042