

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 # N94000005262 (0)

1. Corporation Name

THE LOVELANDERS, INC.



Principal Place of Business

Mailing Address

**4002 S TAMiami TR
VENICE FL 34293**

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VENICE FL 34293**

3. Date Incorporated or Qualified
10/25/1994

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0551561

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

**ROBERTS, GREGORY C
341 W VENICE AVE
VENICE FL 34285**

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 NAME STREET ADDRESS CITY - ST - ZIP

PD HEMMERT, BEVERLY
1150 TARPON CENTER DR
VENICE FL 34285

TITLE NAME STREET ADDRESS CITY - ST - ZIP

VD FOGLIETTA, MARGOT
1239 WATERSIDE LN
VENICE FL 34292

TITLE NAME STREET ADDRESS CITY - ST - ZIP

TD HINDS, ANN
5896 BUCHANAN RD
VENICE FL 34293

TITLE NAME STREET ADDRESS CITY - ST - ZIP

SD SPINO, RITA
1808 FLAMETREE LN
VENICE FL 34293

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D BLAKE, LOIS
336 OAKWOOD CIR
ENGLEWOOD FL 34223

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D BLAKE, LOIS
336 OAKWOOD CIR
ENGLEWOOD FL 34223

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP

P. Jack Mahoney
369 Redwood Road
Venice, Florida 34293

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP

V.P. Bernard Hinds
5896 Buchanan Road
Venice, Florida, 34293

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP

T. Betty Saunders
2113 Tocobaga Lane
Nokomis, Florida 34275

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP

Cor. S. Betty Bevins
8930 Huntington Point Drive
Sarasota, Florida 34238

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

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61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

***61.25

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:

Rita A. Spino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rita A. Spino

3/1/96 -941-
493-4729

Date

Daytime Phone

CR2E037 (12/95)