

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 # N95000000668 (2)

1. Corporation Name

NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF WHITE PEOPLE, FLORIDA CHAPTER, INC.

Principal Place of Business

20 VAUGHN ROAD
WINTER HAVEN FL 33880

Mailing Address

P.O. BOX 1566
EAGLE LAKE FL 33839



FIN 59-3363347

2. Principal Place of Business

21 Same

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

DANIELS, H.E. "DAN"
20 VAUGHN ROAD
WINTER HAVEN FL 33880

3. Date Incorporated or Qualified

02/08/1995

3a. Date of Last Report

4. FEI Number

Applied for - No Employees

☒ 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

10. Name and Address of New Registered Agent

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

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 ☒ PTD ☐ DELETE

NAME DANIELS, H.E. "DAN"
STREET ADDRESS 20 VAUGHN ROAD
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE ☒ D ☒ DELETE

NAME HUMPHREY, LOUIS
STREET ADDRESS 3160 FISHER LANE
CITY-ST-ZIP LAKE WALES FL 33853

TITLE ☒ D ☒ DELETE

NAME SMITH, DEWEY
STREET ADDRESS 224 DORIS STREET
CITY-ST-ZIP LAKELAND FL 33813

TITLE ☒ D ☒ DELETE

NAME RAYMOND, RICHARD
STREET ADDRESS 1525 S. LINCOLN AVENUE
CITY-ST-ZIP LAKELAND FL 33803

TITLE ☒ Sec; Sharon Eck ☒ DELETE

NAME 110 Rebecca Lane
STREET ADDRESS WinterHaven, Fla 33880
CITY-ST-ZIP

TITLE ☒ Member (D) ☒ DELETE

NAME Dee Midboe
STREET ADDRESS 745 Ave. S, SW
CITY-ST-ZIP WinterHaven, Fla 33880

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ D ☒ Change ☒ Addition

1.2 NAME Member
1.3 STREET ADDRESS Rev Don Faulkner
1.4 CITY-ST-ZIP 412 Longfellow Blvd Suite C
Lakeland, Fla 33801

2.1 TITLE ☒ D ☒ Change ☒ Addition

2.2 NAME Gwen Piper (D)
2.3 STREET ADDRESS 6830 NewmanCirEast
2.4 CITY-ST-ZIP Lakeland, Fla 33881

3.1 TITLE ☒ Member (D) ☒ Change ☒ Addition

3.2 NAME Bill Mantel (D)
3.3 STREET ADDRESS 107 Lakeview Dr
3.4 CITY-ST-ZIP Leesburg, Fla 34788

4.1 TITLE ☒ D ☐ Change ☒ Addition

4.2 NAME James Sills (D)
4.3 STREET ADDRESS 775 Oak St
4.4 CITY-ST-ZIP Auburndale, Fla 33823

5.1 TITLE ☒ D ☐ Change ☐ Addition

5.2 NAME John Rodgers (D)
5.3 STREET ADDRESS 2530 46thAveN, St Pete, Fla 33714
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME 700001812507
6.3 STREET ADDRESS -05/08/96--01008--029
6.4 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 included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)