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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State 👈

1996

DIVISION OF CORPORATIONS N95000003851 (1)

DOCUMENT #	N95000003851	(1)
VERNON RECREATION	ON ASSOCIATION, INCORPOR	ATED

			•							
Principal Place of Business Mailing Address										
HIGHWAY 78 SOUTH P.O. BOX 728 SHADY GROVE ST. VERNON FL 32462 VERNON FL 32462										
						1	 Date Incorporated or Qualifi 08/14/1995 	ed 3a.	Date of Las	t Report
2. Principal Place	of Business	2a. Mailing			······································	-	I. FEI Number		Т	Applied For
21 5 10 1	16		me				<i>5 9-33233</i> 3	19		Not Applicable
Suite, Apt. #, (etc.	Suite, /	kpt. #, etc.				. Certificate of Status Desired		•	5 Additional
City & State		City & S	State							Required
23		28					 Election Campaign Financin- Trust Fund Contribution 	° 🗆		DO May Be ed to Fees
Zip 24	Country 25	Zip 29		Country	'	8	. This corporation has liability	for intangible	tax under s	
	9. Name and Address of Curre		gent	30		10	Florida Statutes Name and Address of Ne	Yes [
				B1	Name				n vilous	** · · · · · · · · · · · · · · · · · ·
glover, e	DWIN			82	Stree	ot Address (F	P.O. Box Number is Not Accer	otable)		
3559 CREE				L_	01.00	or ridelicios p	TO DOX HUMBON IS HOT NOOBL	/table)		
VERNON F	L 32462			83						
				84	City			F	85 Zi	ip Code
11. Pursuant to the	ne provisions of Sections 617.050;	2 and 617.1508, I	lorida Statute	s, the above-r	named d	corporation	submits this statement for the			registered office
familiar with, a	agent, or both, in the State of Flor and accept the obligations of Sec	da. Such change Jon 617.0503, Fid	was authorize rida Statutes.	ed by the corp	oration'	's board of d	directors. I hereby accept the a	ippointment a	as registered	d agent. I am
SIGNATURE	deven !!	ouls						2	/23/	196
12.	ature, typed or printed name of registered agen OFFICERS AN	D DIRECTORS	(NO)	TE: Registered Agen	t signature	e required when		DATE	ID ENTEROY	200 0140
707.5	COS. APMY		DELETE	1.1 TITLE		1	ADDITIONS/CHANGES TO C	JEFICERS AN	Change	ORS IN 12
NAME E	-dwin Glover 1559 Creck Rd.	(>	12 NAME		ļ				LJ riodillosi
	_			1.3 STREET	ADDRESS	s				
TITLE V	CEPRESIDENT	162	Torress	1.4 C/TY-S	T- ZIP				· <u> </u>	
NAME C	ARY COLOURY	L]DELETE	2.1 TITLE					Change	Addition
STREET ADORESS 3	862 Creek Rd.		U	2.2 NAME 2.3 STREET	VUUDEGG.					
CHY-ST-ZIP	JERNON, FL 32	1462		2. 4 CITY - S		'				
TITLE	TREASUV	<i>P</i> F]DELETE	31 TITLE					Change	Addition
NAME	TERESA LAND 1288 PATE POND	RD	D	3.2 NAME						
STREET ADDRESS \	A A COUNTY FOR	22112 1		3.3 STREET		3				
TITLE 3	RCCHIAI LAUR	BROWER	IDELETE 🗻	3.4. CITY-S 4.1 TITLE	1-ZIP				Change	Addition
NAME Z.	ot 1 Culperper law	Co. Rd 2	r_{r}	4. 2 NAME						XOGILION
STREET ADDRESS	PERNUN FL. 324	62	•	4.3 STREET	ADDRESS	;]				
CHY+SI-ZIP	BOARIL MEMBER			4.4 CITY- 51	-ZIP					
		L.	DELETE (5.1 TITLE		-			Change	Addition
STREET ADDRESS 2	381 COCKCIRCLE			5.2 NAME						
DITY-ST-ZIP	VERNOH FL 32	462		5.3 STREET / 5.4 CITY - ST		1				
TITLE 30	MACO mende		DELETE (6.1 TITLE	- 411		6000017 -04/17/9601	832	E Grange	Addition
NAME D	ennis Boyeth		V	6.2 NAME :				.0150	04	_
STREET ADDRESS 30	144 COOK GIRCOR			6.3 STREET A	NDDRESS		***61.25		11-	16- ac
CITY-ST-ZIP V	the that the information supplied	(46C	li manuali (4)	6.4 CITY-ST	- ZIP	<u> </u>				
oath; that I am	rtify that the information supplied vinformation indicated on this annual officer or director of the corpolick 12 or Block 13 if changed, or c	ration or the recei	ver or trustee	arreport is true empowered to						