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98 FEB 24 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000004578 (9)**

1. Corporation Name

GREEN HILLS COMMUNITY CENTER, INC.

Principal Place of Business
**17913 PARK PL.
FOUNTAIN FL 32438**

Mailing Address
**P.O. BOX 284
FOUNTAIN FL 32438**

3. Date Incorporated or Qualified

09/25/1995

4. FEI Number

59-1617740

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 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

**STRICKLAND, ALINE
18527 HWY. 231
FOUNTAIN FL 32438**

10. Name and Address of New Registered Agent

81 Name **GROVER Barbara J**
82 Street Address (P.O. Box Number is Not Acceptable)
**~~21521 Owenwood Rd~~
12341 OWENWOOD RD**
83 City **Fountain** **FL** 85 Zip Code **32438**

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 **BARBARA J. GROVER**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-23-98

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE
NAME **PITZER, HERBERT**
STREET ADDRESS **20121 BRANDON RD**
CITY-ST-ZIP **FOUNTAIN FL 32438**

TITLE **V** ☐ DELETE
NAME **KOERNER, GARY**
STREET ADDRESS **17445 KOERNER RD**
CITY-ST-ZIP **YOUNGSTOWN FL**

TITLE **S** ☐ DELETE
NAME **STRICKLAND, ALINE**
STREET ADDRESS **18527 HIGHWAY 231**
CITY-ST-ZIP **FOUNTAIN FL**

TITLE **D** ☐ DELETE
NAME **GROVER, ELTON**
STREET ADDRESS **OWEN WOOD**
CITY-ST-ZIP **FOUNTAIN FL**

TITLE **D** ☒ DELETE
NAME **BONNER, ROBERT**
STREET ADDRESS **21017 HURST RD**
CITY-ST-ZIP **FOUNTAIN FL 32438**

TITLE **D** ☒ DELETE
NAME **SMILEY, JIM**
STREET ADDRESS **SCOTT RD.**
CITY-ST-ZIP **FOUNTAIN FL 32438**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **KOERNER, GARY** ☒ Change ☐ Addition
1.2 NAME **P17445 KOERNER RD.**
1.3 STREET ADDRESS **YOUNGSTOWN FL**
1.4 CITY-ST-ZIP

2.1 TITLE **STRICKLAND, ALINE** ☐ Change ☐ Addition
2.2 NAME **V 18527 HIGHWAY 231**
2.3 STREET ADDRESS **FOUNTAIN, FL.**
2.4 CITY-ST-ZIP

3.1 TITLE **S GROVER, BARBARA** ☐ Change ☒ Addition
3.2 NAME **~~Barbara J~~**
3.3 STREET ADDRESS **OWENWOOD RD**
3.4 CITY-ST-ZIP **FOUNTAIN, FL**

4.1 TITLE **A. Alar** ☐ Change ☐ Addition
4.2 NAME **2/24/98**
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **D GREEN, ROBERT** ☐ Change ☒ Addition
5.2 NAME **12612 DAVIS ST**
5.3 STREET ADDRESS **FOUNTAIN, FL**
5.4 CITY-ST-ZIP

6.1 TITLE **D Wynn, Paul** ☐ Change ☒ Addition
6.2 NAME **20010 WARNOCK RD**
6.3 STREET ADDRESS **FOUNTAIN, FL**
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: **ELTON GROVER**

2-23-98

850-722-9730

CR2E037 (10/97)