

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 # N95000005059 (9)

1. Corporation Name

ROLLING HILLS COMMUNITY ACTION GROUP INC.

Principal Place of Business

5685 JOHNSON AVENUE
MULBERRY FL 33860

Mailing Address

5685 JOHNSON AVENUE
MULBERRY FL 33860



3. Date Incorporated or Qualified
10/23/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-326 9908

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

PETE, MARY B
5685 JOHNSON AVENUE
MULBERRY FL 33860

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

Mary B. Pete

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE Chair-Person (D) ☐ DELETE
NAME Mary B. Pete
STREET ADDRESS 5685 Johnson Ave.
CITY-ST-ZIP Mulberry, FL. 33860

1.1 TITLE ☐ Change ☐ Addition

TITLE Sec. (D) ☐ DELETE
NAME Cleo Cox
STREET ADDRESS 175 Brewton St.
CITY-ST-ZIP Mulberry, Florida

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE (Director)
NAME Willie Cook ☐ DELETE
STREET ADDRESS 5995 Beckwith Ave.
CITY-ST-ZIP Mulberry, FL. 33860

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE (D) ☒ DELETE
NAME Loren Baker
STREET ADDRESS 60 Williams St.
CITY-ST-ZIP Mulberry, FL., 33860

2.1 TITLE Sec. (D) ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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:

Mary B. Pete
Mary B. Pete

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

741-428-1303

Date

Daytime Phone #

CR2E037 (12/95)