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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N9500005214 (0)

WIDOWED PERSONS SERVICE OF MARION COUNTY, INC.



				!
Principal Place of Business	Mailing Address			s consistat man south derit dosit dobit delit delit ditt ditt filit 1760) (179) (20)
8672 C SW 96TH LN. OCALA FL 34481	8672 C SW 96TH LN. OCALA FL 34481			
				3. Date Incorporated or Qualified 10/31/1995 3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied For Not Applied For
21 Suite Act # etc	26			59-3356780 Not Applicab
Suite, Apt. #, etc.	Suite, Apt. #, etc.	 <u> </u>		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country	Zip	Cour	ntry	This corporation has liability for intangible tax under s. 199.032,
24 25	29	30		Florida Statutes Yes X No
9. Name and Address of Curr	ent Registered Agent		041 41	10. Name and Address of New Registered Agent
BALDACCHINO, SAUDRA			81 Name	Saundra Durrence
11600 N. U.S. HWY. 27		ľ	82 Street A	Address (P.O. Box Number is Not Acceptable) 1600 North U.S. Highway 27
OCALA FL 34482-1040		-	B3 1	1000 North U.S. Highway 27
OONDATE OFFICE 1940			63	
		, , , , , , , , , , , , , , , , , , ,	84 City	85 Zip Code
11. Pursuant to the provisions of Sections 617.05	02 and 617 1508. Florida Statuto	e the show	UC Domod on	cala FL 85 Zp Code 34482-10
or registered agent, or both, in the State of Fix	orida. Such change was authorize	ed by the co	orporation's t	reporation submits this statement for the purpose of changing its registered officionard of directors. I hereby accept the appointment as registered agent. I am
	Surrence.			
SIGNATURE Signature typed or printed name of registered ag-		E: Rogistered A	Voent sonature re	19 2 2 2 - 96 DATE
	ND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITE	.F	☐ Change ☐ Addition
NAME BASLER, SHIRLEY		1.2 NAM	Æ [See attached continuation of
STREET ADDRESS P.O. BOX 1917		1.3 STR	EET ADDRESS	item 12. Director Saundra
CITY-ST-ZIP BELLEVIEW FL 34421		1.4 CIT	Y-ST-ZIP	
TITLE D	□ DELETE	2 1 1171	E	Baldacchino name changed Addition
NAME WILEY, ALVIN STREET ADDRESS 111 SE 25TH AVE.		2 2 NAM	AE	to Saundra Durrence
OCALA DI DAAMA		23 STR	EET ADDRESS	
CITY-ST-ZIP UCALA FL 344/1	[] DELETE		Y-ST-ZIP	
NAME MCLEOD, LOIS	DELETE	3.1 TITL		☐ Change ☐ Addition
STREET ADDRESS 520 SE FT. KING ST.		3.2 NAM	-	
CITY-ST-ZIP OCALA FL 34471			EET ADDRESS	
TITLE D	DELETE		Y-\$T-ZIP	
NAME COOLEY, EDNA		4.1 THL		☐ Change ☐ Addition
STREET ADDRESS 5610 NE 4TH ST.		4. 2 NAM	EET ADDRESS	
CITY-ST-ZIP OCALA FL 34470				
TIPLE D	DELETE	5.1 TiTL	-ST-ZIP	☐ Change ☐ Addition
NAME EASTMAN, GEORGE		5.2 NAM		☐ Change ☐ Addition
STREET ADDRESS 2000 SE 173RD CT.		i i	ET ADDRESS	
CITY-ST-ZIP SILVER SPRINGS FL 34488			-S1-ZIP	
TITLE D	DELETE	6.1 TITL		Change Addition
NAME CARD, DORIS		6.2 NAM	E	- Juditori
STREET ADDRESS 8672 C SW 96TH LN.		6.3 STRE	ET ADDRESS	
CITY-ST-ZIP OCALA FL 34481		6.4 CITY	- ST - 7/P	
 I do hereby certify that the information supplied certify that the information indicated on this ann 	with this filing is voluntarily furnis	la a al la a al ala		fy 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 Blook 13 if changed, or on an attachment with an address.

GNATURE:

| Author | Aut

12. Continued

Director Donald Lippincott 4955 S.E. 148th Place Summerfield, Florida 34491

Director Jorine Robinson 3404 S.E. 35th Street Ocala, Florida 34471

Director Jean Sorenson 5740 S. Pine Street Ocala, Florida 34480

Director Dr. Blair Stewart 7171 State Road 200 Ocala, Florida 34476

Director Patti D. Thayer 3404 S.E. 35th Street Ocala, Florida 34471

Director Mary Spaid 1644 N.E. 22nd Avenue Ocala, Florida 34470

Director Maudie Green 7651 S. W. State Road 200 Ocala, Florida 34477

Director Alice Foster 8565 S. W. 107th Lane Ocala, Florida 34481

Director (Was Saundra Baldacchino) (NAME CHANGE) Saundra Durrence 11600 North U.S. Highway 27 Ocala, Florida 34482-1040