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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000001773

1. Corporation Name

ECONOMIC DEVELOPMENT COMMISSION OF HERNANDO COUNTY, INC

Principal Place of Business

12 SOUTH MAIN ST.
BROOKSVILLE FL 34601
US

Mailing Address

PO BOX 96
BROOKSVILLE FL 34605
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/02/1996

4. FEI Number

59-3393270

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

9. Name and Address of Current Registered Agent

RICHARD MICHAEL
12 SOUTH MAIN ST.
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent

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

Richard Michael, Executive Director

January 15, 1999

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 ☒ DELETE

NAME
PIERMATTEO, JOSEPH J
STREET ADDRESS
P. O. BOX 1508 N/A
CITY-ST-ZIP
BROOKSVILLE FL 34605

TITLE ☐ DELETE

NAME
TAYLOR, DENNIS A
STREET ADDRESS
7343 ROYAL OAK DRIVE
CITY-ST-ZIP
SPRING HILL FL 34607

TITLE ☐ DELETE

NAME
DAUS, EDWARD J
STREET ADDRESS
398 FLORIAN WAY
CITY-ST-ZIP
SPRING HILL FL 34609

TITLE ☐ DELETE

NAME
CLIFFORD, DONALD W
STREET ADDRESS
3135 TREELINE COURT
CITY-ST-ZIP
SPRING HILL FL 34606

TITLE ☐ DELETE

NAME
GAWOR-ADAMS, BARBARA
STREET ADDRESS
9362 WALLIEN DRIVE
CITY-ST-ZIP
BROOKSVILLE FL 34601

TITLE ☐ DELETE

NAME
JOHN WICKERT
STREET ADDRESS
4320 LAKE IN THE WOODS
CITY-ST-ZIP
SPRING HILL FL 34607

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME
VICE PRESIDENT
MORRIS BORTON
1.3 STREET ADDRESS
P.O. BOX 156
1.4 CITY-ST-ZIP
BROOKSVILLE FL 34605

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
PRESIDENT

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
DIRECTOR

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
TREASURER

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
SECRETARY

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-99

Date

Daytime Phone #

CR2E037 (11/98)