

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2004 8:00 am**  
**Secretary of State**

02-19-2004 90011 020 \*\*\*\*61.25

**DOCUMENT # N99000003334**

1. Entity Name  
**DESOTO CORRECTIONAL INSTITUTION EMPLOYEES  
CLUB INC.**



Principal Place of Business  
**13617 SE HIGHWAY 70  
ARCADIA, FL 34266-7800**

Mailing Address  
**13617 SE HIGHWAY 70  
ARCADIA, FL 34266-7800**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052004 Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-3576891**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'CONNOR, ROBERT  
13617 SE HIGHWAY 70  
ARCADIA, FL 34266-7800**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Robert W. O'Connor*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME RHODES, BEVERLY  
STREET ADDRESS 13617 SE HIGHWAY 70  
CITY-ST-ZIP ARCADIA, FL 342667800

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☒ Delete  
NAME FARCUS, ROBERTA  
STREET ADDRESS 13617 SE HIGHWAY 70  
CITY-ST-ZIP ARCADIA, FL 342667800

TITLE ☒ Change ☐ Addition  
NAME SD  
STREET ADDRESS Head, Freida  
CITY-ST-ZIP 13617 SE Highway 70  
Arcadia, FL 34266-7800

TITLE VPD ☒ Delete  
NAME HODGE, WILLIAM  
STREET ADDRESS 13615 SE HIGHWAY 70  
CITY-ST-ZIP ARCADIA, FL 342667800

TITLE ☒ Change ☐ Addition  
NAME VPD  
STREET ADDRESS Lawrence, David  
CITY-ST-ZIP 13617 SE Highway 70  
Arcadia, FL 34266-7800

TITLE D ☐ Delete  
NAME O'CONNOR, ROBERT  
STREET ADDRESS 13617 S.E. HIGHWAY 70  
CITY-ST-ZIP ARCADIA, FL 342667800

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Beverly M. Rhodes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*2/14/04*

*863-494-3727*