715459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

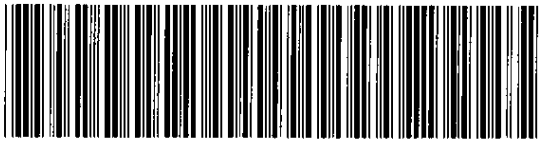
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



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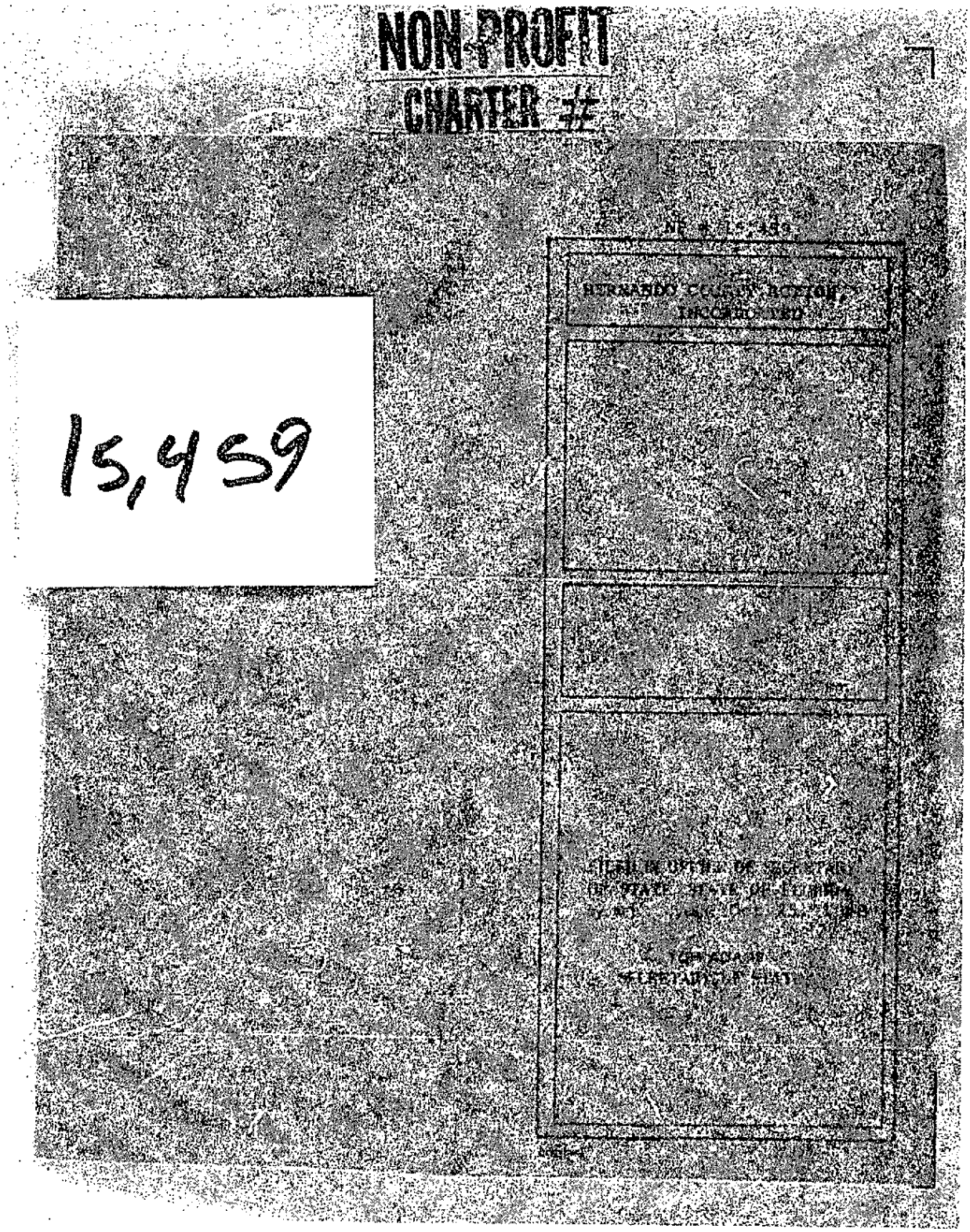
NON-PROFIT
CHARTER #
15,459

Mr. Tom Adams
Secretary Of State
Tallahassee, Florida.

15.457

Dear Sir:

Enclosed are the Articles of Incorporation for Hernando County Action, a non-profit community organization organized for the economic and social improvement of the depressed areas of Hernando County. We ask your approval of this document.

Enclosed also is my personal money order for thirty dollars to cover the cost of Domestic Corporation and Corporate Documents. I hope this form of payment is acceptable.

Please address correspondence from your office to: Mrs. Glennell Williams, Secretary
Hernando County Action
1011 Kennedy Boulevard
Brooksville, Florida 33512

Thank-you

FILED
SEE DEPT. OF STATE
ALL FEES
FLORIDA

MORE PROFIT FROM
MORE PEOPLE

C. TAX
FILING
R
C
RETURN

ARTICLES OF INCORPORATION

for

HERNANDO COUNTY ACTION, INCORPORATED
a corporation not for profit

We, the undersigned, hereby associate ourselves for the purpose of becoming incorporated under Chapter 617 of the Florida Statutes applicable to corporations not for profit, and respectfully petition the Secretary of State for approval of such incorporation under the following Articles of Incorporation:

Article I Name and Location

Section 1 The name of this corporation shall be: Hernando County Action, Incorporated with its principle place of business at Kennedy Park, Hernando County, Florida. The mailing address of this corporation is: 1011 Kennedy Boulevard, Brooksville, Florida, 33512.

FILED
1969 OCT 25 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article II Purposes

Section 1 To effect, through cooperative effort, social improvement of the area known as Hernando County, Florida.

Section 2 To provide a channel of communication among the residents of Hernando County and between the residents and the various agencies, both public and private, which have an effect upon community and personal development.

Section 3 To mobilize and coordinate available resources for the mutual benefit of the residents of Hernando County.

Section 4 To provide incentive and stimulate self-help among the residents of Hernando County and to promote understanding

Article 2 Section 4 cont.

among all people.

Article III Membership

Section 1 Any and all persons seriously interested in the purposes of this corporation and who agree to abide by such rules and regulations as may be established in accordance with the by-laws and who have attained the age of eighteen years shall be eligible for membership in this corporation. Such persons shall become members if they have (a) a sponsor who is a member of the corporation (b) the approval of the membership committee as established in accordance with the by-laws and (c) the approval of the general membership at any regular meeting of the corporation at which a quorum is present.

Section 2 Any member of this corporation shall enjoy all the rights and privileges of all members of the corporation in accordance with the by-laws.

Article IV Meetings

Section 1 This corporation shall meet at least once a month and no more than once a week. Any meetings called less than seven days since the last regular meeting of the corporation shall be considered as committee meetings and shall not be binding on the membership as a whole except where such powers are established in the by-laws.

Article V Longevity

Section 1 This corporation shall have perpetual existence.

Article VI Officers

Section 1 Officers of this corporation shall be a President, Vice-President, Secretary, and Treasurer with the provision that a Second Vice-President and/or a Third Vice-President and a Second Secretary and/or a Third Secretary may serve as officers if they are duly elected in accordance with the by-laws.

Section 2 The officers shall do the customary work of their respective offices and will receive no remuneration of any kind for the performance of these duties.

Section 3 Officers shall be elected by the general membership at a regular meeting of the corporation, a quorum being present, and shall serve for a period of one year.

Section 4 The present officers of the corporation are as follows:

President	Mr. Leroy Goodson
Vice-President	Mrs. Betty Simpkin
Second Vice-President	Mrs. Justine Inmon
Third Vice-President	Mrs. Loretta Snell
Secretary	Mrs. Clennell Williams
Second Secretary	Mrs. Dorothy Smith
Third Secretary	Miss Stella DeRamus
Treasurer	Mr. Dewey Hendricks

Article VII Board of Directors

Section 1 The affairs of the corporation shall be managed by a Board of Directors constituted in the following manner: The President of the corporation, the Treasurer of the corporation, and three additional members of the corporation

Article VII Section 1 cont.

elected by the general membership of the corporation at any regular meeting, a quorum being present, and shall serve for a term of one year.

Section 2 The present members of the Board of Directors are as follows:

Mr. Leroy Goodson, 613 Woods Drive, Brooksville, Florida.

Mr. Dewey Hendricks, 411 W. Hendricks Ave., Brooksville, Fla.

Mrs. Blanche Cambric, 906 Josephine Street, Brooksville, Fla.

Mrs. Mildred Sims, 306 Armstrong Avenue, Brooksville, Florida.

Mrs. Flora Belle DeRamus, 611 Woods Drive, Brooksville, Fla.

Article VIII Executive Board

Section 1 There shall be an executive board consisting of all the duly elected officers of the corporation.

Section 2 The executive board shall be responsible for coordinating the activities of all committees and bodies within the corporation, and the setting of the agenda for regular meetings of the corporation.

Article IX By-Laws

Section 1 A committee duly elected by the general membership of this corporation shall propose by-laws for the conduct of its business and the carrying out of its purpose.

Section 2 By-laws so prepared shall be submitted to the membership of the corporation at a regular meeting for their approval or refusal upon a two-thirds vote of the members, a quorum being present.

Article X Committees

Section 1 Permanent committees shall exist indefinitely and shall be created with the approval of the general membership at any regular meeting of the corporation, a quorum being present.

Section 2 Members of permanent committees shall be elected by the general membership in accordance with the by-laws.

Section 3 Temporary committees shall be created by the president and shall exist according to the president's will.

Section 4 Members of temporary committees shall be appointed by the president.

Section 5 The president of the corporation is an ex officio member of all committees.

Article XI Public Meetings

Section 1 All meetings of the corporation shall be open to the public with the exception of the Executive Board, the Board of Directors, and permanent committees. Attendance at meetings of these bodies shall be by invitation only.

Article XII Charter Members

Section 1 The following persons are Charter Members of the corporation and shall become full members upon acceptance of the Charter. These persons are hereby exempt from the requirements of Article III herein:

NAME	ADDRESS
Blanche Cousins	906 Josephine St
Mildred Sims	3060 Nahrang
B James Ambrose	713 Flood Dr

Article XII Section 1 cont.

NAME	ADDRESS
Charles Spann	230 "A" Street
Nanetta Smith	232 A Street
Cora Lee Washington	303 Armstrong St
Ella Baylor	823 Leonard St
Matt Gardner	615 Wood Dr
Stella L. Quillman	611 Wood Drive
Flora B. DeJarnett	611 Wood Dr
Jessy J. Gardner	619 Wood Dr.
Betty [illegible] Simpkins	223-A-St. Brookville, Va.
Theodore Russell	231 Fl
Jeanine Inman	1002 1st
Loretta Snell	231 A
Elizabeth Williams	1011 Kennedy Blvd
Robert Bean	RFD 4 Box 651
[illegible]	411 Hendricks Ave
Annie Ruth Jackson	1011 Kennedy Blvd
Edward Dan Simmons	316 Post Gate Rd
Mae Pearl Neal	621 Dixie Ave
Henry Stewart	807 E 5th
Ramon NAGRNCKY G	130 Ft Mulche Road
R E Lupold	Brookville R3 Box 66
Ralph C. McMillan	R3 Box 68
J. P. Inman	1002 First St Brookville, Va
Loretta Newburn	Mrs. Elizabeth Williams 411 West Hendricks
Mamie Johnson	610 John St Scott Ft
Alexander Young	G-4 USE

Article XII Section 1 cont.

NAME	ADDRESS
Mrs Cathrine A Hudson	326 Ash St. Brooksville, Fla
Johnnie Will Glenn	1209 Mitchel Road.
Miss Mae Helen Kent	313 Daniel Ave
Mr Robt Lee Kent	313 Daniel ave.
Allen Williams	309 Daniel Ave.
Annie Mae Peterson	29 Mc-Kay St.
Mrs Ina Richards	W. Allen Hdqrs
J.D. Floyd	902 ST. Rd. 50 E Brooksville
Lillie Mae Fagin	101 Kennedy Blvd Brooksville
Carrie L. Parker	1001 First Street Brooksville
Frances J. Graves	1011-1/2 St. Street Brooksville
Mary S. Owens	707 Hazel Ave. Brooksville

Bernice Lester	206 N. 21
Minnie Lewis Ingram	1041 Kennedy Blvd
Jessie Mae R.	803 Jones St.
Charles Abell	R.H. Box 9
~~Thomas Broadus~~	R H Box 9
Ernest L. Clarke	11th Street
Robert Bryant	R. H. Box 9
L. Sanders	R of T 2 Box 204 V.
Gabriel Ellison	1109 Fortune Road
Eddie Sanders	317 Jurga Street
Fred Culpepper	304 R.R. ST
Lee Sanders	R H Box 126
Mack Scissum	R.H. Box 9
Mary ann Blake	Ocala
Prophet Jones	~~1011 Kennedy Blvd~~ 58
Fredricka Jones	206 Dranes ave
Jessie Lee Johnson	
~~Mattie Adams Fay~~	
Wesley Blake	Dade City Hwy
~~Ozzie Lee Mc Cray~~	
Jarrad Brown	
John L. Akins	313 Duke St city

These articles are :

Mr. Leroy Goodson 613 Woods ville, Florida.
Mr. Dewey Hendricks 411 W. , Brooksville, Fla.
Mrs. Blanche Cambric 906 Jo rooksville, Florida.
Mrs. Mildred Sims 306 Armst oksville, Florida.

Herman Raberty	1640 Jones Ave.
Hazel DeVenice	611 Woodlawn Brooksville
Robert Lee Badget	1011 Kennedy Dr BLU
Katherine Badget	1011 Kennedy Dr.
Almazine Melvine	216 W St.
Howard Melvine	216 W St.
[illegible]	
Dallie Mae Bailey	702 Hazel ave, City
Eugene Howard	846 Howard Street
Edna Barlow	823 Lincoln Street
Melody Willis	Rt 3 Box 65 Linda Hill
Mrs Richard Gibson Jr.	226 H St
Annie Lee Brinson	Rt 3 Box 184
Virginia Williams	Leonard Dr 307
Johnnie Mae Mathew	838 Block St
Cecil Mathew	838 Block St

Mrs. Beatrice Lee

Mr. Leroy Goodson 613 Woods Drive, Brooksville, Florida.
Mr. Dewey Hendricks 411 W. Hendricks Ave., Brooksville, Fla.
Mrs. Blanche Cambric 906 Josephine St., Brooksville, Florida.
Mrs. Mildred Sims 305 Armstrong Ave., Brooksville, Florida.

Article XIII Charter Acceptance and Amendment

Section 1 This Charter shall become effective upon acceptance of two-thirds of the persons present and voting at any regular meeting of the corporation, a quorum being present.

Section 2 Amendments to this Charter shall be considered upon a motion of two-thirds of the members present and voting at any regular meeting of the corporation, a quorum being present, and shall become effective upon acceptance of two-thirds of the members present and voting at any regular meeting of the corporation, a quorum being present.

Article XIV Distribution of Assets upon Dissolution

Section 1 No person, firm, or corporation shall ever receive any dividends or profits from the undertaking of this corporation and upon dissolution of this organization all of its assets remaining after payment of all costs and expenses of such dissolution shall be distributed to organizations which have qualified for exemption under Section 501 (c) (3) of the Internal Revenue Code, or to the Federal Government, or to a state or local government, for a public purpose, and none of the assets will be distributed to any member, officer, or trustee of this corporation.

Article XIV Subscribers

Section 1 The names and residences of the subscribers to these articles are :

Mr. Leroy Goodson 613 Woods Drive, Brooksville, Florida.
Mr. Dewey Hendricks 411 W. Hendricks Ave., Brooksville, Fla.
Mrs. Blanche Cambric 906 Josephine St., Brooksville, Florida.
Mrs. Mildred Sims 306 Armstrong Ave., Brooksville, Florida.

IN WITNESS WHEREOF, we, the undersigned subscribing incorporators, have hereunto set our hands and seals this 16th day of Oct. 1968, for the purpose of forming this corporation not for profit under laws of the State of Florida.

Leroy Goodson

Dewey Hendricks

Blanche Cambric

Mildred Sims

STATE OF FLORIDA)
) SS
COUNTY OF HERNANDO)

Before me, a Notary Public duly authorized in the state and county named above to take acknowledgments, personally appeared Leroy Goodson, Blanche Cambric, Mildred Sims, Dewey Hendricks and , to me known to be the persons described as subscribers in and who executed the foregoing articles of incorporation, and they acknowledged before me that they executed and subscribed to these articles of incorporation.

Witness my hand and official seal in the county and state named above this October 16, 1968
(date)

NOTARY PUBLIC

MY COMMISSION EXPIRES

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES MAY 24, 1972
BONDED THROUGH FRED W. DIECKELMANN

CORPORATION NOT FOR PROFIT

No. 1PF 15959

Resident Agent Certificate

NAME

HERNANDO COUNTY ACTION, INC.

MR. LEROY GOODSON

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

TOM ADAMS
SECRETARY OF STATE

BY

corp-31

STATE OF FLORIDA

OFFICE
SECRETARY OF STATE

58 NOV -7 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NOT FOR PROFIT

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served

NW 168 MZ 978 *****2.00

In pursuance of Section 617.023, Florida Statutes, the following is submitted, in compliance with said Act:

First—That HERNANDO COUNTY ACTION, INCORPORATED

a corporation not for profit duly organized and existing under the laws of the State of FLORIDA

with its principal place of business at 1011 KENNEDY BOULEVARD KENNEDY PARK

County of HERNANDO State of FLORIDA

has designated and established 1011 KENNEDY BOULEVARD
(Street address and building number, P.O. Box address not acceptable)

City of BROOKSVILLE, County of HERNANDO

State of FLORIDA as its place of business or domicile for the service of process within this State, and named as its agents MR. LEROY GOODSON

to accept service of process.

Complete the following when there is a change of one or more officers or directors.

OFFICERS:	AFFIX TITLES: NAME	SPECIFIC ADDRESS

DIRECTORS: (THERE (3) required by law)	NAME	SPECIFIC ADDRESS

By Leroy Goodson
President

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity.

By Leroy Goodson
Resident Agent

Section 617.023, Florida Statutes. Office and resident agent. Every corporation organized hereunder shall maintain an office in the state with a resident agent thereat upon whom process may be served. The resident agent may be either an individual or a corporation. The corporation shall keep the secretary of state informed of the current city, town or village and street address of said office, together with the name of the resident agent.

Filing Fee $ 30.00

NP # 15,459

HERNANDO COUNTY ACTION, INCORPORATED

(XXX) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: October 25, 1968 By:

(1) Resident agent filed

DISSOLVED BY PROCLAMATION
10 - 21 - 74

corp-32

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

10/25/1977

FILED
OCT 27 1977
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
OCT 27 1977

BRUCE A. SMATHERS
SECRETARY OF STATE

F. R. RITTER, DIRECTOR
DIVISION OF CORPORATIONS

DAVID A. MACNAMARA
ASSISTANT SECRETARY OF STATE

HERNANDO COUNTY ACTION, INC.
121 E. Broad St.
Brooksville, FL 33512

Dissolved By Proclamation
under Section 608.36, Fla.
Statutes, 10-21-74.

REINSTATEMENT SECTION

Telephone No. 904/488-5988

REINSTATEMENT
FILED 11/4/77

715459

SUBJECT: HERNANDO COUNTY ACTION, INCORPORATED

Document: RETURNED XX ; PENDING _____ ; REINSTATEMENT XX .

1. _____ NAME IS NOT AVAILABLE.

2. _____ Check for _____ has been received and deposited but is insufficient to cover the following:

Balance Due for Filing Fee _____.

REINSTATEMENT
Fee in Lieu of Reinstatement Filing Fee 5
72 Privilege Tax 5
73 Annual Report 5
74 Annual Report 5
75 Annual Report 5
76 Annual Report 5
77 Annual Report 5
Total 35
Bal. Due 30
Refund

_____ Please complete and return the enclosed report(s) with a check for _____ to complete the reinstatement.

_____ Please list officers and directors and their street addresses on the annual report.

_____ Annual report must be signed by an officer of the corporation.

XX A Florida registered agent and street address must be shown on the annual report.

_____ We must have a street address for the corporation.

_____ Please return the same annual report enclosed.

_____ Your _____ annual report and fee is pending reinstatement.

_____ OTHER:

11/4/77

715459

ARP. 1
11/12/76
Cr

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT

Bruce A. Smathers
Secretary of State

72 – 1977

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE.

Form COR 620

FILED
11/04/77
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation's Principal Office

71545
Hernando County Action Inc. DISSOLVED
121 East Broad Street
Brooksville, Florida 33512

72

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
10/25/68	59-1235273	1971

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
J. O. Floyd	Pres		902 State Rd. 50 E.	Brooksville, Florida
Alma T. Bradley	Sec.		3407 Hwy. 50 W.	Brooksville, Florida
Donald W. Pickens	V.Dir.		915 Hammock Road	Brooksville, Florida

7. Registered Agent Information

Name: Donald W. Pickens | Street Address (Do NOT Use P.O. Box Number): 915 Hammock Road

City, State and Zip Code: Brooksville, Florida 33512

If you wish to change Registered Agent on this form, enter all new information here ▶

Name | Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary, or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

11/4/77

Typed Name of Signing Officer	Title	Telephone Number
J. O. Floyd	Chairman	904-796-1426

Signature J. O. Floyd | Date 10/15/77

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

[illegible] INCORPORATED

715-159

77

4TH NOVEMBER,

77

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

BRUCE A. SMATHERS
SECRETARY OF STATE

11/4/1977
F. R. RITTER, Director
Division of Corporations
904/488-3140

DAVID C. MACNAMARA
ASSISTANT SECRETARY OF STATE

[illegible] COUNTY ACTION, INC.
[illegible]
Brooksville, FL 33512

SUBJECT: [illegible] COUNTY ACTION, INC.

DOCUMENT NUMBER: [illegible]

This will acknowledge receipt of the following:

1. XXX Check(s) totalling $ 50.
2. _____ Articles of Incorporation filed
3. _____ Amendments to Articles of Incorporation filed
4. _____ Articles of Merger or Consolidation filed
5. _____ Certificate of Withdrawal filed
6. _____ Limited Partnership filed
7. _____ Limited Partnership Annual Report filed
8. _____ Trademark Application filed
9. _____ Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.
10. XXX Reinstatement filed 11/4/1977
11. _____ Articles of Dissolution filed
12. _____ OTHER:

ENCLOSED:

1. _____ Certified Copy(ies).
2. XX Certificate(s) Under Seal.
3. _____ Photocopy(ies).
4. _____ OTHER:

Corp. 100
1/1/77 /tr

A M E N D M E N T

Word Processing: February 2, 1978 By: pas

Updating: 2-8-78 By:

A notification letter was mailed to: Donald W. Pickens, Exec. Director
HERNANDO COUNTY ACTION, INC.
Post Office Box 896
Brooksville, Florida 33512 Addressed to: Mr. Pickens

---

changing corporate name from : HERNANDO COUNTY ACTION, INC.

An Amendment to the Articles of Incorporation of HERNANDO-SUMTER COMMUNITY ACTION AGENCY was filed.

Filing date: February 1, 1978

Remittance totaling: $20.00

Charter Number: 715459

Enclosure(s) (1)

715459

Name change

Hernando County *Action, Inc.*

Helping people help themselves

121 EAST BROAD STREET
POST OFFICE BOX 876
BROOKSVILLE, FLORIDA, 33512

Phone: 796-1425
796-1431

FILED
FEB 1 2 10 PM 1978
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

APPROVED AND FILED

597421

January 24, 1978

Bureau of Corporation Records
Charter Section
Secretary of State
The Capitol
Tallahassee, Florida 32304

fppd

2?2 ? + 057 *****
?2?? ? + 956 *****

Gentlemen:

We desire to amend our articles of incorporation as follows:

1. Change the name to Hernando-Sumter Community Action Agency, Incorporated.

2. Adopt new by-laws.

3. Expand area for provision of services.

Enclosed you will find:

1. Resolution to Change Charter.
2. Resolution to Adopt New By-Laws.
3. Resolution for Area of Operation.
4. Check for $20.00
   a. $15 filing fee
   b. $ 5 fee for certified copy.

Please return a certified copy of the new charter as soon as possible.

PRIVILEGE TAX	
C. TAX	
FILING	15
C. COPY	5
R. A. FEE	
P. COPY	
SEARCH	
TOTAL	20
BALANCE DUE	

Sincerely yours,

Donald W. Pickens

Donald W. Pickens,
Executive Director

DWP/bjm

"An Equal Opportunity Employer"

Hernando County *Action, Inc.*

Helping people help themselves

121 EAST BROAD STREET
POST OFFICE BOX 696
BROOKSVILLE, FLORIDA 33512

Phone 796-1425
796-1431

RESOLUTION TO CHANGE CHARTER

WHEREAS, the Board of County Commissioners of Hernando and Sumter Counties recognize the need for a Community Action Agency; and

WHEREAS, they have consented for the Hernando County Action, Inc. to act as the Community Agency;

THEREFORE, the Board hereby amends the charter for the Hernando County Action, Inc. to include serving the areas in the Hernando and Sumter County, and to change the name to the Hernando-Sumter Community Action Agency.

BY: _____
CHAIRMAN OF THE BOARD

BY: _____
SECRETARY OF THE BOARD

DATE: _____

Hernando County *Action, Inc.* — *Helping people help themselves*

121 EAST BROAD STREET
POST OFFICE BOX 896
BROOKSVILLE, FLORIDA 33512

Phone: 796-1425
796-1431

RESOLUTION TO ADOPT NEW BY LAWS

WHEREAS, the Board of Directors of Hernando County Action, Inc. has resolved to revise the Charter to become Hernando-Sumter Community Action Agency to be effective immediately upon recognition by the Community Services Administration and/or receipt of the new Charter from the State of Florida;

BE IT THEREFORE RESOLVED, that at such time of recognition the By Laws of Hernando-Sumter Community Action Agency be effective and the bases for the operation of a Community Action Agency in Hernando and Sumter Counties.

BY: _____
CHAIRMAN OF THE BOARD

BY: _____
SECRETARY OF THE BOARD

DATE: 11-4-78

Hernando County *Action, Inc.* — *Helping people help themselves*

121 EAST BROAD STREET
POST OFFICE BOX 896
BROOKSVILLE, FLORIDA. 33512

Phone: 796-1425
796-1431

RESOLUTION FOR AREA OF OPERATION

WHEREAS, the Board of Directors has authorized the amendment of the charter,

BE IT RESOLVED THAT: the Hernando-Sumter Community Action Agency be authorized to serve in the five county area, Hernando, Sumter, Marion, Citrus and Levy to the provision of services as they relate to the Office of Economic Opportunity Act of 1964 and 1967 as amended.

BY: _____
CHAIRMAN OF THE BOARD

BY: Thelma T. Gradey
SECRETARY OF THE BOARD

DATE: 1-11-72

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 620) 12-1-77

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

715459 HERNANDO COUNTY
ACTION, INCORPRATED
121 EAST BROAD STREET
BROCKSVILLE, FL 33512

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

4. Federal Employer Identification Number (FEIN) 59-1235273

5. Date of Last Report 1977

6. Names and Street Addresses of each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
FLOYD, J. D.	PRES		902 STATE ROAD 50 EAST	BROOKSVILLE, FL
GRADDY, ALMA T.	SEC		3407 HWY 50 WEST	BROOKSVILLE, FL
PICKENS, DONALD W.	DIR		915 HAMMOCK ROAD	BROOKSVILLE, FL

7. Registered Agent Information

Name: PICKENS, DONALD W.
Street Address (Do NOT Use P.O. Box Number): 915 HAMMOCK ROAD
City, State and Zip Code: BROOKSVILLE, FL 33512

If you wish to change Registered Agent on this form, enter all new information here ▶

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
J. D. Floyd	Chairman of the Board	(904) 796-5761 ext. 21
Signature: J. D. Floyd		Date: 1/12/78

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

10.00

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

715459
HERNANDO-SUMTER COMMUNITY ACTION AGECY
101 EAST BROAD STREET
BROOKSVILLE, FL 33512

If above address is incorrect or is to be changed, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 10/25/1968

4. Federal Employer Identification Number (FEIN): 59-1235202

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
FLOYD, L. C.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
SCADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
PICKENS, DONALD W.	D	915 HAMMOCK ROAD	BROOKSVILLE, FL

FEB 30 1979
STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

7. Registered Agent Information

Name
PICKENS, DONALD W.
Street Address (Do NOT Use P.O. Box Number)
915 HAMMOCK ROAD
City, State and Zip Code
BROOKSVILLE, FL 33512

If you want to change Registered Agent or this name, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

DO NOT WRITE IN THIS SPACE

2-26

Typed Name of Officer: L. D. Floyd
Title: Chairman of the Board
Telephone Number: 904-796-1425
Signature: L. D. Floyd
Date: 1/9/79

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE
ANC
FILED
APR 18 3 05 AM 1980
FLORIDA DEPARTMENT OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

715459
HERNANDO-SUMTER COMMUNITY ACTION AGECY
121 EAST BROAD STREET
BROOKSVILLE, FL 33512

If above address is incorrect in any way, enter the correct address

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient.

Street Address: 715 U.S. 41 SOUTH
P.O. Box No.: P. O. Box 896
City: Brooksville,
State: Florida
Zip Code: 33512

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
10/25/1968	59-1235273	1979

6. Names and Street Addresses of Each Officer and Director

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
	FLOYD, J. O.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
	GRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
NEW	MICHAEL J. GEORGINI	D	Hwy 301 South (P. O. Box 26)	Oxford, Florida
	PICKENS, DONALD W.	D	915 HAMMOCK ROAD	BROOKSVILLE, FL

7. Registered Agent Information

Name: MICHAEL J. GEORGINI
PICKENS, DONALD W.
Street Address (Do NOT Use P.O. Box Number): 915 HAMMOCK ROAD HWY 301 SOUTH
City, State and Zip Code: OXFORD, FLORIDA 32684
BROOKSVILLE, FL 33512

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
J. O. FLOYD	CHAIRMAN OF THE BOARD	904-796-1425

Signature: J. O. Floyd
Date: 3/31/80

DO NOT WRITE IN THIS SPACE
KG APR 18 1980

(Form COR 620 Rev. 11/1579)

Hernando/Sumter Community Action Agency

POST OFFICE BOX 6x6 BROOKSVILLE, FLORIDA 33512 TELEPHONE: (904) 796-1425

March 31, 1980

4934 04/15/80
006 27 3.00 05

1980 Annual Reports
Post Office Box 6327
Tallahassee, Florida 32301

RE: Statement for New Registered Agent

Gentlemen:

Enclosed is our check Number 3315, in the amount of $13.00 for the Filing Fee and $3.00 for the New Registered Agent Fee.

Please forward the necessary papers to be completed for our New Registered Agent.

Thank you for your anticipated cooperation in this regard.

Sincerely,

J. D. FLOYD
CHAIRMAN OF THE BOARD

ss

Enclosure

#715459

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

Do NOT write in this space

APPROVED

FILED

Apr 6 8 45 AM 81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation's Principal Office

715459
HERNANDO-SUMTER COMMUNITY ACTION AGECY
715 U.S. #1 SOUTH
P.O. BOX 896
BROOKSVILLE, FL 33512

If above address for incurred in any way, enter the correct address in Item 2 include Zip Code

2. Street Change of Address of Corporation's Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 10/25/1968

4. Federal Employer Identification Number (FEIN): 59-1235273

5. Date of Last Report: 1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
FLOYD, J. D.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
GRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
GEORGINI, MICHAEL J.	D	HWY 301 SO.; P.O. BOX 26	OXFORD, FL.

Registered Agent Information

Name
GEORGINI, MICHAEL J.

Street Address (DO NOT Use P.O. Box Number)
HIGHWAY 301 SOUTH

City, State and Zip Code
OXFORD, FL. 32684

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

See signature restrictions and/or instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Type Name of Officer	Title	Telephone Number
J. D. FLOYD	CHAIRMAN OF THE BOARD	796-1425

Signature of Officer	Date	Amount Enclosed
[signature]	715459 03-10-81	244 $ 10.00

Do Not Write in This Space

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1982

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries.
Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

715459
HERNANDO-SUMTER COMMUNITY ACTION AGECY
715 U.S. 41 SOUTH
P.O. BOX 696
BROOKSVILLE, FL 33512

10/25/1968	59-1235273	04/06/1981

FLOYD, J. D.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
CRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
GEORGINI, MICHAEL J.	D	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

Registered Agent Information

GEORGINI, MICHAEL J.

HIGHWAY 301 SOUTH

OXFORD, FL. 32684

11/3/82

$3.00 additional fee required for Registered Agent changes

J. D. Floyd Chairman of the Board 904-796-1425

Charter # Only

715459 ER 2/16

Hernando/Sumter Community Action Agency
Requestor's Name

Post Office Box 896
Address

Brooksville, Florida 33512 (904) 796-1425
City State ZIP Phone #

CORPORATION(S) NAME

Hernando/Sumter Community Action Agency

( ) PROFIT
( ) NON PROFIT ( ) AMENDMENT ( ) MERGER

( ) FOREIGN ( ) DISSOLUTION ( ) MARK

( ) LIMITED PARTNERSHIP ( ) ANNUAL REPORT ( ) RESERVATION
( ) REINSTATEMENT ( ) OTHER

( ) CERTIFIED COPY ( ) PHOTO COPIES ( ) CERTIFICATE UNDER SEAL

( ) WALK IN ( ) WILL WAIT ( ) PICK UP ( ) MAIL OUT ( ) CALL ( ) AFTER 4:30

VALIDATION USE

FEB 16 1 Fo PM '83
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name Availability	
Document Examiner	LT
Updater	MHK FEB 16 1983
Updater Verifier	MHK FEB 16 1983
Acknowledgment	TM
W.P. Verifier	RC 2/16

15
5
20

CERTIFIED

FEB 14 1983

CERTIFICATE OF AMENDMENT OF ARTICLES OF INCORPORATION

OF

HERNANDO-SUMTER COMMUNITY ACTION AGENCY

FILED
FEB 16 1 58 PM '83
SECRETARY OF STATE
TALLAHASSEE FLORIDA

We, the undersigned, Chairman and Secretary, respectively of Hernando-Sumter Community Action Agency, a corporation organized under the laws of the State of Florida and located in the City of Brooksville, Florida hereby certify:

1. The name of the corporation is Hernando-Sumter Community Action Agency.

2. The Articles of Incorporation are amended by the following resolution adopted by the Board of Directors and the Members on December 16, 1982.

Resolved, that the Articles of Incorporation shall be amended so that Article XIV is added to.

Article XIV

In the event of dissolution, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State, or local government for exclusive public purpose.

Notwithstanding any other provision of these articles, this corporation will not carry on any other activities not permitted to be carried on by (a) a corporation exempt from Federal Income Tax under sections 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provision of any future United States internal revenue law or (b) a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code of 1954 or any other corresponding provision of any future United States internal revenue law.

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law).

3. The above resolution was adopted by the Board of Directors and by the Members unanimously.

Signed and dated at Brooksville, Florida the 16th day of December, 1982.

(CORPORATE SEAL)

(NOTARY SEAL)

Jill F. Floyd
Chairman

Notary Public

Alma D. Gradley
Secretary

Expiration Date:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES NOV 25 1983
BONDED THRU GENERAL INS. UNDERWRITERS

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Apr 25 P 83 AM 1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

715459
HERNANDO-SUMTER COMMUNITY ACTION AGECY
715 U.S. 41 SOUTH
P.O. BOX 896
BROOKSVILLE, FL 33512

10/25/1968	59-1235273	02/16/1982

FLOYD, J. D.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
GRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
GEORGINI, MICHAEL J.	D	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

Registered Agent Information

GEORGINI, MICHAEL J.

HIGHWAY 301 SOUTH

OXFORD, FL. 32684

$3.00 additional fee required for Registered Agent changes.

3/5/83

J. D. Floyd | Chairman of the Board | 904-796-1425

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APR 17 1 25 PM 1984

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address (Corporation Principal Office)

715459
HERNANDO-SUMTER COMMUNITY ACTION AGENCY
715 U.S. 41 SOUTH
P.O. BOX 696
BROOKSVILLE, FL 33512

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Address NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified to Do Business in Florida: 10/25/1968

4. Federal Employer Identification No. (If any): 59-1235808

5. Date of Last Report: 04/25/1983

Name(s) and Address(es) of Each Director		Street Address of Each Officer and Director (Do NOT use P.O. Box Number)	City, State and Zip Code
1 FLOYD, J. D.	P	902 STATE ROAD 50 EAST	BROOKSVILLE, FL
2 GRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
3 GEORGINI, MICHAEL J.	D	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

Registered Agent Information

6. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH

OXFORD, FL. 32684

6. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

I hereby certify that the corporation named in item 1 has complied with the provisions of the Florida Statutes relative to the registered agent and that the registered agent is authorized to accept service of process within this state.

Signature: Michael J. Georgini Michael J. Georgini Exec. Dir. Date: 4/14

$7.00 additional fee required for Registered Agent changes.

To be signed by a corporate officer or other authorized person.

I hereby certify that I am authorized to execute this Report as required by Florida Statutes, and that the facts stated above are true.

Signature: Date: 4/14

Type or Print Name of Signer: J.D. Floyd

Title: Chairman of the Board

Telephone Number: 904-796-6761 #241

If you desire a certificate of status, check here and enclose an additional $5 with your payment.

CERTIFICATE OF STATUS DESIRED
$5 fee must be included with payment

COR-2(1-84)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER 05/01 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation

735457 4
HERNANDO-SUMTER COMMUNITY ACTION AGENCY
715 U.S. 41 SOUTH
P.O. BOX 696
BROOKSVILLE, FL 33512

Street Address

P.O. Box #

City, State and Zip Code

2. Mailing address to which you prefer to have annual report mailed (if other than above)

Street Address or P.O. Box #

City, State and Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 10/25/1968

4. Federal Employer Identification Number: 59-1235202

5. Date of Last Annual Report Filed: 04/17/1984

6. Names and Street Addresses of Each Officer and Directors as of December 31, 1984

	Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use P.O. Box Number)	City, State and Zip Code
1	FLOYD, J. C.	P	802 STATE ROAD 50 EAST	BROOKSVILLE, FL
2	GRADDY, ALMA T.	S	5407 HWY 50 WEST	BROOKSVILLE, FL
3	GEORGINI, MICHAEL J.	D	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.
4				
5				
6				

Registered Agent Information

7. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors or

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See Signature Instructions on page 2 for Signature on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Item 6)

Signature: Michael J. Georgini

Typed Name of Signing Officer | Title | Date | Telephone Number

(If) Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

ACCEPTED

86 APR -9 AM 11:41

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Officer

715459 4
HERNANDO-SUMTER COMMUNITY ACTION AGENCY
715 U.S. 41 SOUTH
P.O. BOX 896
BROOKSVILLE, FL 33512

2. Enter Change of Address of Corporation Principal Office (P.O. Box Number Address is NOT Sufficient)

Street Address 31
8055 Kennedy Boulevard

P.O. Box No. 32
P. O. Box 896

City and State 33
Brooksville, Florida

Zip Code 34
34298-0896

3. Date Incorporated or Qualified To Do Business in Florida: 10/25/1968

4. Federal Employer Identification (or Social Security) Number (FEIN): 59-1235202

5. Date of Last Report: 04/03/1985

6. Names and Street Addresses of Each Officer and Director of the Corporation

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do Not Use P.O. Box Number)	4. City and State
~~FLOYD, L. D.~~ Deceased	P	~~802 STATE ROAD 50 EAST~~	~~BROOKSVILLE, FL~~
GRADDY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL
GEORGINI, MICHAEL J.	D	HWY 301 SO. P.O. BOX 26	OXFORD, FL.
Fish, Frank	P	3600 U. S. 41 North	Brooksville, Fl.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

8. Name and Address of New Registered Agent

Name 81

Street Address (Do Not Use P.O. Box Number) 82

City and State 83

Zip Code 84
FL.

9. Pursuant to the provisions of section 607.325, Florida Statutes, for the dissolved corporation, executing this statement for the purpose of changing its registered office or registered agent, or both, and the successor registered agent has changed its business address to the registered office below.

Dated, 19

(Registered Agent Accepting Appointment)

DATE

$3.00 additional fee required for Registered Agent changes.

10. For signature instructions or definitions of terms see instructions on reverse side of this form.

I Hereby Certify That I Am An Officer of the Corporation Empowered to Execute This Report as Required by Chapter 607.1.5.
I Further Certify That I Understand the Signature I Am Affixing Hereto Is Made Subject to the Penalties of Section 817.155, Florida Statutes.
Officer signing must be listed in Item 1 or 2.

Signature: Michael Georgini

Date: 4/4/86

Type Name of Signing Officer: Michael J. Georgini

Title: Executive Director

Telephone Number: 904-796-1425

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT

1987

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of $25 Required -- Make Checks Payable To: Secretary of State

715459
HERNANDO-SUMTER COMMUNITY ACTION AGENCY
6055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE, FL. 34298-7856

10/25/1968 | 59-1235202 | 04/02/1986

FINN, FRANK	P	3600 U.S. 41 NORTH	BROOKSVILLE, FL.
GRADY, ALMA T.	S	3407 HWY 50 WEST	BROOKSVILLE, FL.
GEORGINE, MICHAEL J.	E/D	HWY 301 SOUTH, P.O. BOX 26	OXFORD, FL.

REGISTERED AGENT INFORMATION

GEORGINE, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

FL.

$3.00 additional fee required for Registered Agent changes.

February 20, 1987

Michael J. Georgine | Executive Director | 904-796-1425

$5 Additional Fee required for a Certificate of Status

Charter Number Only

715459

Requestor's Name

Address

City State ZIP Phone

CORPORATION(S) NAME

VALIDATION ONLY

05/31/95 00163 007
NON PROFIT AMENDMENT
AMENDMENT 15.00
TOTAL 15.00

( ) Profit
( ) NonProfit ( ) Amendment ( ) Merger

( ) Foreign ( ) Dissolution ( ) Mark

( ) Limited Partnership ( ) Annual Report ( ) Other
( ) Reinstatement ( ) Reservation ( ) Change of Registered Agent

( ) Certified Copy ( ) Photo Copies ( ) Certificate Under Seal

( ) Call When Ready ( ) Call If Problem ( ) After 4:30
( ) Walk In ( ) Will Wait ( ) Pick Up ( ) Mail Out

Name Availability: SD
Corporate Examiner: SD
Typist: SD
Certifier:
Expedite:
W.P. Verifier:

CR2E031 (R8-85)

Amend

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

June 20, 1988

Eunice M. Neville
P.O. Box 896
Brooksville, FL 34298-7896

SUBJECT: HERNANDO-SUMTER COMMUNITY ACTION AGENCY
Reference: 715459

Dear Ms. Neville:

We have received your document for the above corporation and your check(s) totaling $15.00. However, the document has not been filed and is being returned for the following:

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., INCORPORATED, INC., COMPANY, CO.

If you have further questions concerning the filing of your document, please call (904) 487-6902.

Stacy DeHart
Document Examiner
Amendment Section

ARTICLES OF AMENDMENT
to
ARTICLES OF INCORPORATION

Pursuant to the provision of Chapter 617, Florida Statutes, the undersigned corporation adopts the following articles of amendment to its articles of incorporation.

FIRST: The name of the corporation is:

HERNANDO SUMTER COMMUNITY ACTION AGENCY, INC.

SECOND: The following amendment(s) to the articles of incorporation was (were) adopted by the corporation: To change the name of the agency to:

MID FLORIDA COMMUNITY SERVICES, INC.

THIRD: The amendment(s) was (were) adopted by the Board of Directors on the 12th day of May, 19 88.

FOURTH: The above amendment(s) was (were) approved by a majority of the members of the corporation on the 19th day of May, 19 88.

Dated May 19, 19 88

Hernando Sumter Community Action Agency
Corporation Name

By Eunice M. Neville
President or Vice President

By Alma P. Gaddy
Secretary or Assistant Secretary

CR2E009(8-85)

STATE OF FLORIDA
COUNTY OF Hernando

Before me, the undersigned authority, personally appeared Eunice M Neville, to me well known to be the person(s) who executed the foregoing articles of amendment to articles of incorporation and acknowledged before me, according to law, that she made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 19th day of May, 19 82.

Notary Public

My commission expires:

CR2E009(9-85)

APPROVED

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1988 JUL 25 AM 10:29

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

715459
HERNANDO-SUMTER COMMUNITY ACTION AGENCY
8055 KENNEDY BLVD.
P.O. BOX 696
BROOKSVILLE, FL. 34266-

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address (1)

P.O. Box No. (2)

City and State (3)

Zip Code (4)

3. Date Incorporated or Qualified To Do Business in Florida: 10/25/1968

4. Federal Employer Identification Number (FEIN): 59-1236202

5. Date of Last Report: 03/18/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31st

Names of Officers and Directors	Title	Street Address (Do NOT Use P.O. Box Number Alone)	City and State
1 FISH, FRANK	P/D	3600 U.S. 41 NORTH	BROOKSVILLE, FL.
2 GRADDY, ALMA T.	S/D	3407 HWY 50 WEST	BROOKSVILLE, FL
3 GEORGINI, MICHAEL J.	E/D	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

8. Name and Address of New Registered Agent

Name (1)

Street Address 1 (Do NOT Use P.O. Box Number) (2)

Street Address 2 (Do NOT Use P.O. Box Number) (3)

City and State (5) FL

Zip Code (6)

9. Pursuant to the provisions of Section(s) 607.034 and/or 617.1501, Florida Statutes, the above named corporation, organized under the laws of the State of Florida, 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 above sub-section by the board of directors on

I hereby accept the appointment of registered agent and agree to act in this capacity. I further agree to comply with the provisions of Section(s) 607.034 F.S.

SIGNATURE (Registered Agent Accepting Appointment) DATE

10. If a foreign corporation, date first authorized to transact business in Florida

11. See reverse side for instructions on how to correct errors or omissions on this form.

I Certify That I Am An Officer or Director of the Corporation, As Required by Section 607.0203 F.S. to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.
(Officer or Director signing must be named in Block 7)

Signature: [signature] Date: 6/13/88

Typed Name of Signing Officer or Director: Michael J. Georgini Title: Executive Director Telephone Number: 904-796-1425

12. Should you desire a certificate of status, check the box: CERTIFICATE OF STATUS DESIRED ☐ $5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

715459 4
MID FLORIDA COMMUNITY SERVICES, INC.
8055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE, FL. 34605-0896

3. Date Incorporated or Qualified in Florida: 10/25/1968

4. Federal Employer Identification No.: 59-1235202

5. Date of Last Report: 07/20/1988

P/D	FISH, FRANK	3600 U.S. 41 NORTH	BROOKSVILLE, FL.
S/D	GRADDY, ALMA T.	3407 HWY 50 WEST	BROOKSVILLE, FL
S/D	GEORGINI, MICHAEL J.	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

REGISTERED AGENT INFORMATION

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

FL

Michael J. Georgini — Executive Director — 2/12/89 — 904-796-1425

CERTIFICATE OF STATUS DESIRED ☐ — $5 Additional Fee required for a Certificate of Status

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
1990 MAR 28 AM 10:37
FLORIDA DEPARTMENT OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

715459 4

ZIP + 4 PRESORT

MID FLORIDA COMMUNITY SERVICES, INC.
8055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE, FL. 34605-0896

2. If Address in Box 1 is incorrect in any way, enter the correct address in box. P.O. Box numbers are NOT sufficient. The NAME of the corporation must be changed by separate amendment.

Street Address

P.O. Box No.

City and State

3. Date Incorporated / Qualified in Florida: 10/25/1968

4. FEI Number: 59-1235202

5. Names and Street Addresses of Each Officer and Director

Title	Name of Officer and/or Director	Mailing Address of Each Officer and Director (Do not enter P.O. Box Number unless no street address exists)	City and State
P/D	FISH, FRANK	3600 U.S. 41 NORTH	BROOKSVILLE, FL.
S/D	GRADDY, ALMA T.	3407 HWY 50 WEST	BROOKSVILLE, FL
E/D	GEORGINI, MICHAEL J.	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

REGISTERED AGENT INFORMATION

6. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

FL.

Signature: Michael J. Georgini

Date: 3/14/90

Michael J. Georgini — Executive Director — 904-796-1425

Certificate of Status Desired

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
MAY 27 91
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

DO NOT WRITE IN THIS SPACE

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

1. Name and Mailing Address of Corporation: DOCUMENT #715459 (4)

ZIP + 4 PRESORT

MID FLORIDA COMMUNITY SERVICES, INC.
8055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE, FL. 34605-0896

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Be Business in Florida: 10/25/1968

4. FEI Number: 59-1235202

FEI Number Applied For

FEI Number Not Applicable

$8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to erase over incorrect information)

Title 1	Name of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
P/D	FISH, FRANK	3600 U.S. 41 NORTH	BROOKSVILLE, FL.
S/D	GRADDY, ALMA T.	3407 HWY 50 WEST	BROOKSVILLE, FL
E/D	GEORGINI, MICHAEL J.	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

FL.

8. If desired, the name and address of a new registered agent and/or registered office may be designated here. The new registered agent must sign below to accept the appointment.

SIGNATURE (Registered Agent Accepting Appointment) DATE

10. I certify that the information indicated on this report complies with the applicable requirements of Chapter 607, Florida Statutes, and that to the best of my knowledge and belief, it is true and correct. I am aware that false information submitted in a document to the Department of State pursuant to Chapter 607, Florida Statutes, and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607.

SIGNATURE Michael J. Georgini DATE 4/17/91

Typed Name of Signing Officer or Director: Michael J. Georgini

Title: Executive Director

Daytime Telephone Number: (904) 796-1425

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status.

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
DEPT OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

Read Instructions on Other Side Before Making Entries

FILING FEE $61.25 Make Payable To: Secretary of State

DOCUMENT #715459 (4)

MID FLORIDA COMMUNITY SERVICES, INC.
8055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE FL 34605-0896

2. [illegible]

21 Mailing Address

22 P.O. Box No.

23 City or State | 24 Zip Code

3. 10/25/1968

3a. Last Report Filed	4. FEI Number	Certificate of Authority	5. $8.75 Additional Fee Required for a Certificate of Status
05/22/1991	59-1235202	FEI Number Applied For	CERTIFICATE OF STATUS DESIRED ☐

6. Name and address of current officers, directors, and agents:

1	2	3	4
2/D	~~FISH, FRANK~~	~~3600 U.S. 41 NORTH~~	~~BROOKSVILLE, FL.~~
S/D	~~GRADDY, ALMA T.~~	~~3407 HWY 50 WEST~~	~~BROOKSVILLE, FL~~
E/D	GEORGINI, MICHAEL J.	HWY 301 SO.,P.O. BOX 26	OXFORD, FL.
P/D	NEVILLE, EUNICE M.	S. County Road 453 P. O. Box 715	Lake Panasoffkee, Fl.
V/D	MOULTON, KAREN	7348 Broad Street	Brooksville, Fl.
S/D	FLOYD, IRA BELLE	1572 E. Jefferson Street	Brooksville, Fl.

REGISTERED AGENT INFORMATION

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD, FL. 32684

8. 81 [illegible]
82 [illegible]
83 [illegible]
84 [illegible] 85 FL.

9. [illegible] X

SIGNATURE Michael J. Georgini Date 6/24/92

Michael J. Georgini Executive Director 904 796-1425

File Now: Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
1993 MAY -1 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 715459 (4)

MID FLORIDA COMMUNITY SERVICES, INC.
8055 KENNEDY BLVD.
P.O. BOX 896
BROOKSVILLE FL 34605-0896

DO NOT WRITE IN THIS SPACE

3. Date Incorporated/Qualified: 10/25/1968
3a. Date of Last Report: 07/15/1992
4. FEI Number: 591235202
Applied For / Not Applicable

FILING FEE $208.00 | ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE | MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. Certificate of Status Desired: $8.75 Additional Fee Required
6. Certified Copy: $5.00 May Be Added to Fees
7. Certified Copy of Articles of Incorporation: $138.75 Supplemental Fee Not Required
8. Check if Changes Other Than Those Listed Below: X

9. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD FL 32684

10. Name and Address of New Registered Agent

FL

11. Signature: Michael J. Georgini Date: 2/22/93

12.
P/D
NEVILLE, EUNICE M
S COUNTY RD 453 POB 715
LAKE PANASOFFKEE FL

V/D
MOULTON, KAREN
7348 BROAD ST
BROOKSVILLE FL

E/D
GEORGINI, MICHAEL J.
HWY 301 SO.,P.O. BOX 26
OXFORD FL

S/D
FLOYD, IRA BELLE
1572 E JEFFERSON ST
BROOKSVILLE FL

13.

SIGNATURE Michael J. Georgini

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 APR 15 AM 6:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name: MID FLORIDA COMMUNITY SERVICES, INC.

DOCUMENT # 715459 (4)

Mailing Address: 8055 KENNEDY BLVD. P.O. BOX 896 BROOKSVILLE FL 34605-7896

Principal Place of Business: 8055 KENNEDY BLVD. P.O. BOX 896 BROOKSVILLE FL 34605-7896

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/25/1968

3a. Date of Last Report: 05/01/1993

4. FEI Number: 59-1235202

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. Nonprofit Exempt from $126.75 Supplemental Fee

2. Mailing Address: 820

9. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD FL 32684

10. Name and Address of New Registered Agent

City: FL

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-State
P/D	NEVILLE, EUNICE M	S COUNTY RD 453 POB 715	LAKE PANASOFFKEE FL
V/D	MOULTON, KAREN	7348 BROAD ST	BROOKSVILLE FL
E/D	GEORGINI, MICHAEL J.	HWY 301 SO.,P.O. BOX 26	OXFORD FL
S/D	FLOYD, IRA BELLE	1572 E JEFFERSON ST	BROOKSVILLE FL

SIGNATURE: [signature] Michael J. Georgini 904-796-1425

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 715459 (4)

1. Corporation Name
MID FLORIDA COMMUNITY SERVICES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
9255 KENNEDY BLVD P.O. BOX 856 BROOKSVILLE FL 34605-7896	920 KENNEDY BLVD P.O. BOX 856 BROOKSVILLE FL 34605-7896 US

3. Date Incorporated or Qualified: 10/25/1968
3a. Date of Last Report: 04/15/1994
4. FEI Number: 59-1235202 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. This corporation has timely filed or incorporate tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

21	2a. Mailing Address 26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

GEORGINI, MICHAEL J.
HIGHWAY 301 SOUTH
OXFORD FL 32684

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

Pursuant to the provisions of Sections 607.0502 and 607.1575, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office, 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 607.0505, Florida Statutes.

SIGNATURE

Signature required when registered agent is the filer. DATE Registered agent signature required when changing. AR

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	NEVILLE, EUNICE M.	12 NAME	
STREET ADDRESS	S COUNTY RD 452 POB 715	13 STREET ADDRESS	
CITY-ST-ZIP	LAKE PANASOFFKEE FL	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	MOULTON, KAREN	22 NAME	
STREET ADDRESS	7348 BROAD ST	23 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL	24 CITY-ST-ZIP	
TITLE	ED	31 TITLE	☐ Change ☐ Addition
NAME	GEORGINI, MICHAEL J.	32 NAME	
STREET ADDRESS	HWY 301,SO.,P.O. BOX 28	33 STREET ADDRESS	
CITY-ST-ZIP	OXFORD FL	34 CITY-ST-ZIP	
TITLE	SD	41 TITLE	☐ Change ☐ Addition
NAME	FLOYD, IRA BELLE	42 NAME	
STREET ADDRESS	1572 E JEFFERSON ST	43 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I (We) hereby certify that the information supplied with this report is true, complete, and accurate and 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 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 with an address.

SIGNATURE: Michael J. Georgini 04/20/95 904-796-1425

SIGNATURE AND TITLE OR PRINTED NAME OF A FLORIDA OFFICER OR DIRECTOR — Date — Daytime Phone #

Michael J. Georgini

COR 702