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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Feb 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

702348

(4)

OKALOOSA-WALTON BAR ASSOCIATION, INC.

Principal Place of Business Mailing Address P.O. BOX 2230 204 BUCK DRIVE FT. WALTON BEACH FL 32548 FT. WALTON BEACH FL 32549-2230 3. Date Incorporated or Qualified 04/27/1961 3a. Date of Last Report 04/16/1996 4. FEI Number NOT APPLICABLE 2. Principal Place of Business 21 25 WALTER WARTIN R.R. &.E. Applied For 2a. Mailing Address 26 PO BOX 2379 Not Applicable \$8.75 Additional Suite, Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Ft. WAlton Bch Ft. WALTON Bch П Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, USA USA Yes X No Florida Statutes 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C. WELLS STONE, WILLIAM F reet Address (P.O. Box Number, is Not Acceptable)

SWATER MALTIN ROLL 82 204 BUCK DRIVE FT. WALTON BEACH FL 32548 WAHON BEACH portions 617.0502 and 617.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of Section 617.0503, Florida Statutes. office or registered agent agent. I am familiar with SIGNATURE (NOTE: Registered Agent signature required when reinstating) 96/6 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE TITLE 1.2 NAME STONE, WILLIAM F NAME 204 BUCK DRIVE 1.3 STREET ADDRESS STREET ADDRESS FT. WALTON BEACH FL 1.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 TITLE TITLE VD q,q2.2 NAME BAUMAN, STEVEN B NAME 2.3 STREET ADDRESS 25 WALTER MARTIN ROAD STREET ADDRESS FT WALTON BCH FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE TD ALTER H. MUNRAY TROELL, LISA 3.2 NAME NAME 102 Boythore DR. 737 HIGHWAY 98 EAST 3.3 STREET ADDRESS STREET ADDRESS Niceville, FL 32583 DESTIN FL 32541 3.4. CITY-ST-ZIP CITY-ST-74P DELETE 4.1 TITLE TITLE Wells, Kelvin C 4. 2 NAME NAME 25 WALTER MARTIN RD 4.3 STREET ADDRESS STREET ADDRESS FT. WALTON BEACH FL 4.4 CITY - ST - ZIP CITY-ST-7/2 DELETE Change * Addition 5.1 TITLE TITLE Bruce Haught WHITNEY, BOBBY L 5.2 NAME NAME 501 Huy 98 E., Suite G. Destin, FL 32540 1201 EGLIN PKWY 5.3 STREET ADORESS STREET ADDRESS SHALIMAR FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE TITLE HAROID F. PERKIJA KNOPES, T. MARTIN A 6.2 NAME NAME 303 WAShineton DA

CITY-ST-ZIP CRESTVIEW FL

14. I do 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 ennual 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.

heoured

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR