FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

703594

C.					
Principal Place	e of Business	Mailing Address			
1261 RANGE RI PO BOX 669 COCOA FL 329	-	1261 RANGE RD PO BOX 669 COCOA FL 32923-7669			3. Date Incorporated or Qualified 02/15/1962 4. FEI Number Applied For
					4. FEI Number Applied For Not Applied ber
2. Principal P	lace of Business	2s. Mailing Address			- 60 75 Additional
21		26			6. Certificate of Status Desired Fee Required
1 Quita Ant	#, etc.	Suite, Apt. #, etc.			B. Election Campaign Financing \$5.00 May Be
22 City & State		City & State			Trust Fund Contribution Added to Fees
23	9	28			7. Is this nonprofit corporation a homeowners association? Yes \(\subseteq \text{No} \)
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible
24	26		30		Personal Property Tax due June 30. Yes No
ļ	9. Name and Address of Curre	nt Registered Agent		04 10	10. Name and Address of New Registered Agent
50/61/4	P. 10.4 P. P. 1.4			Name	WRENCE H. RAIMER
Dixon, Elisabeth n. 840 Eleanor Street			Ī	82 Street	Address (P.O. Box Number is Not Acceptable)
	ISLAND FL 32953		ŀ	83	44 WELLINGTON READ
MC/UU!!	100410 1 € 32300		Ļ		
ŀ				84 City	ne-Gomes FL 85 3000
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statute	es, the at	ove-named	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 617.0503, Fig	orida Stati	utes.	poration's board or directors. I hereby accept the appointment as registered
SIGNATURE		1 Regue			1-17-98
12.	Signature, typed or printed name of registered ag	gent and title if applicable (NOTE ND DIRECTORS	Registered	Agent signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 10	LE	PRE 9,0000
NAME	NOLAN, STEVE		1.2 NA		LAWRENCE H. RAYNER
STREET ADDRESS	1960 FARRINGTON DRIVE		1.3 ST	REET ADDRESS	4244 WELLAGION PORD
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CIT	Y-ST-ZIP	MOLDOWAR M 32935
TITLE	VO	DELETE	2.1 TIT	LE	DANN MACCUMPACHE Whange LAddition
NAME	HU, CUSTER		2.2 NA	ME	SICRIPAN
STREET ADDRESS	6075 ALABANENE AVE			REET ADORESS	8702 CROTUN COURT
CITY-ST-ZIP TITLE	COCOA FL TD	IC DELETE	2.4 CI	TY-ST-ZIP	ZAPE (ANAVERAN PL 3 2 922)
NAME	DIXON, ELISABETH	ej occit	3.1 H		TRUTTED Addition
STREET ADDRESS	520 ELENAOR STREET			REET ADDRESS	118 BRARWES CAND
CITY-ST-ZIP	MERRITT ISLAND FL			TY-ST-ZIP	CALUP PL 32976
TITLE	DV	DELETE	4.1 TIT		TRUNSUMER Change Addition
NAME	WHEELBARGER, ROBERT		4. 2 N	ME	ACREW RUFF
STREET ADDRESS	4063 N BANA AVE #105		4.3 SY	réet address	385 CONNES, CLUM OUNT
CITY-ST-ZIP	COCOA FL		_	Y-ST-ZIP	CJE00 RV 36976
TITLE	SD DUDDIOK MADTILA	DELETE	5.1 TIT		2 NO VICE PROFICEND Change Addition
NAME	RUDDICK, MARTHA	•	5.2 NA		JANE MAVELOWER AND
STREET ADDRESS	275 BUCCANEER AVE, #105 MERRITT ISLAND FL)		REET ADORESS	
CITY-ST-ZIP TITLE	TR	DELETE	5.4 CII	Y-ST-ZIP Le	M & DOURN IL 32940 Change Addition
NAME	ARNOLD, FRANK	-	6.2 NA		
STREET ADDRESS	4100 OCEAN BEACH BLVD.		1	REET ADDRESS	
	00001 851011 51				I

CITY-ST-ZIP | CUCUA BEACH FL

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.

SIGNATURE:

FILED

Feb 16 1998 8:00am

Secretary of State