

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 719104 (2)

1. Corporation Name

LEON F. STEWART - HAL S. MARCHMAN CENTER, INC.



Principal Place of Business

Mailing Address

3875 TIGER BAY ROAD  
DAYTONA BCH FL 32124  
US

3875 TIGER BAY RD  
DAYTONA BCH FL 32124  
US

3. Date Incorporated or Qualified

03/06/1970

3a. Date of Last Report

05/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CANTLEY, ERNEST D  
129 MICHIGAN AVE  
DAYTONA BEACH FL 32014

81 Name Ernest D. Cantley

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

3875 Tiger Bay Road

83

84 City Daytona Bch

FL

85 Zip Code 32174

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: *Ernest D. Cantley*

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

(NOTE: Registered Agent signature required when re-registering)

2-16-96  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	HUGER, JAMES E	
STREET ADDRESS	RIDGEWOOD AVE.	
CITY-ST-ZIP	DAYTONA BCH. FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ATTICK, WILLIAM E.	
STREET ADDRESS	1308 PEACHTREE DR.	
CITY-ST-ZIP	DAYTONA BCH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KLEINSCHMIDT, CHARLES H.	
STREET ADDRESS	233 OAK RIDGE ST.	
CITY-ST-ZIP	HOLLY HILL FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	LYNN, EVELYN	
STREET ADDRESS	824 PENINSULA DR.	
CITY-ST-ZIP	ORMOND BCH FL	
TITLE	PT	<input type="checkbox"/> DELETE
NAME	BEIGHLE, J. W	
STREET ADDRESS	6327 PALMAS BAY CIR.	
CITY-ST-ZIP	PT ORANGE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	Barbara McGrath	
STREET ADDRESS	275 Riverside Drive	
CITY-ST-ZIP	Ormond Bch FL 32174	

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	935 Sycamore Street
1.4 CITY-ST-ZIP	DAYTONA BCH FL 32114
2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	PO Box 9356
3.4 CITY-ST-ZIP	DAYTONA BCH, FL
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Ernest D. Cantley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-96

Date

Daytime Phone #

CR2E037 (12/95)