FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # 729504

(1)

Principal Place of Business Mailing Address * HAYWOOD C. SMITH, JR. * HAYWOOD C. SMITH, JR.											
3917 N.W. 31ST PL 3917 N.W. 31ST PL.			17			•					
GAINESVILLE FL 32606 GAINES		GAINESVILLE FL 32606-812	:7			3. Date incorporated or Qualified 04/26/1974	3a. Da	te of Last R 3/20/199	eport 6		
2. Principal P	lace of Business	2a. Mailing Address			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	4. FEI Number 59-1625322) 	oplied For of Applicable	1	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		—	Additional equired		
City & Stat	e	City & State	····			6. Election Campaign Financing		\$5.00]	
Zip 24	Country 25	28 Zip	Cour	ntry		Trust Fund Contribution 8. This corporation has liability for Florida Statutes	intangible		to Fees . 199.032,	1	
24	9. Name and Address of Current Registered Agent					10. Name and Address of New Re				1	
				81	Name					1	
	IAYWOOD C JR		ļ	82	Street Add	iress (P.O. Box Number is Not Acceptal	ole)			1	
	/ 31ST ST. /ILLE FL 32606			83			······································	····		1	
WAINEON	ALLE I E DESCO		ļ.	84	City			85 Zip	Code	$\frac{1}{2}$	
		00 1047 4500 5: : : 0: 4		\perp			FL			1	
office or r agent La	to the provisions of Sections 617.05 registered agent, or both, in the State of familiar with, and accept the obligations are secured to the coliner of the	e of Florida. Such change was gations of, Section 617.0503, F	ites, the ab authorized Iorida Statu	ove by utes	-named cor the corpora	poration submits this statement for the attion's board of directors. I hereby acce	pt the appo	changing ii pintment as	registered		
SIGNATURE	Signature typed or printed name of registered ag	cart and title if sent-cable (NO	TE: Registered	Aner	nt elonature teor	dred when reinstaling)	DATE				
12.		ND DIRECTORS	13.	,,,,,	it eightfort rede	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12	Ý	
TITLE	P	DELETE	1.1 101	LE				☐ Change	☐ Addition	٥	
NAME	SEAGER, LAURAINE		1.2 NA	ME						15	
STREET ADORESS	1830 NW 51ST TERR.		1.3 STR		ADDRESS					ß	
CITY-ST-ZIP	GAINESVILLE FL		1.4 CIT	Y-51	r-ZIP					<u>]</u>	
TITLE	VD	☐ DELETE	2.1 TH	LE	İ			Change	Addition	Ic	
NAME	KING, JAMES		22 NAI	ME	- 1					1	
STREET ADDRESS	RT 4, BOX 105 B		2.3 STF	REET	address						
CITY-ST-ZIP	ALACHUA FL	T OCCUPANT	2. 4 Cl		T-ZIP			05	Addition	4	
TITLE .	V PETTY	☐ DELETE	3.1 117					Change	Addition	}	
NAME	KEIG, BETTY		3.2 NA							1	
STREET ADDRESS	8825 NW 4TH PLACE		- 1		ADDRESS						
CITY-ST-ZIP TITLE	GAINESVILLE FL S	DELETE	3.4. CIT 4.1 TIT		1 - ZIP			Change	Addition	┨	
NAME	PRING, BETTE	- Deferie	4.2 NA		1			C''l Overige		1	
STREET ADDRESS	8329 SW 3RD PLACE				ADDRESS					1	
CITY-ST-ZIP	GAINESVILLE FL		4.4 CfT							1	
TITLE	T	DELETE	5.1 TIT					Change	Addition	1	
NAME	SMITH, HAYWOOD		5.2 NA		}			. •		1	
STREET ADDRESS	3917 NW 31ST PLACE	•			ADDRESS					1	
CITY-ST-ZIP	GAINESVILLE FL		5.4 CIT							1	
TITLE	D	DELETE	6.1 TIT					Change	Addition	1	
NAME	AMOTT, JOHN		6.2 NA	ME	ĺ					1	
STREET ADDRESS			63.57	REET.	ADDRESS			:		ĺ	

GANESVILLE Ft.

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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

HAYWOOD & BHITH , JR.

4/12/97

(352) 378 · 5469

FILED

May 02 1997 8:00am

Secretary of State