SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 739402

(6)

FLORIDA DÍVISION OF THE IZAAK WALTON LEAGUE OF A MERICA, INC.					
Principal Plac	ce of Business	Mailing Address		-   1986)  1888	81911 BI BIT E(812 BIB4 BIB1) (89)
31 GARDEN COVE DR. P. O. BOX 236 KEY LARGO FL 33037 HOMESTEAD FL 33090 US				Date Incorporated or Qualified     06/16/1977      FEI Number	
	· · · · · · · · · · · · · · · · · · ·			59-0998701	Applied For Not Applicable
2. Principal F	26			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		Suite, Apt. #, etc.		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
City & State City & State				7. Is this nonprofit corporation a homeown	Added to Fees ers association?
23		28		Yes	No
Zip	Country	Zip	Country	8. This corporation owes or has paid the ci	
24	25 9. Name and Address of Current		30	Personal Property Tax due June 30.	U Yes U No
	5. Name and Address of Carrent	Kedistelen Wäalit	81 Name	10. Name and Address of New Registere	d Agent
CHEMOW	TETU MICUAEL E				
CHENOWETH, MICHAEL F 31 GARDEN <b>Ö</b> ÖVE DR.			82 Street Addres	ss (P.O. Box Number is Not Acceptable)	
KEY LAR			83		
			84 City	F	85 Zip Code
11. Pursuant i	to the provisions of sections 617,0502 a	nd 617.1508. Florida Statutes, t	he above-named corporati		
office or n	egistered agent, or both, in the State of	Florida, Such change was auth	orized by the corporation's	on submits this statement for the purpose of ch s board of directors. I hereby accept the appol	ntment as registered
	•	ns of, section of radous, monte	a Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	E: Registered Agent signature require	ed when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	SD	DELETE	1.1 TITLE	13	Change Addition
NAME	CHENOWETH, MICHAEL F		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY LARGO FL 33037		1.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	PD	DELETE	2.1 TITLE	00	Change Addition
NAME	KEELER, CARL		2.2 NAME		
STREET ADDRESS	211 CHAUNCEY AVE. E		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDENTON FL 34208		2.4 CITY-ST-ZIP		
TITLE	TD	DELETE	3.1 TITLE 5.0	0	Change Addition
NAME	MILLER, LLOYD		3.2 NAME	MOUN PIONCE GARBON COVE DRIVE	
STREET ADDRESS	27720 SW 197 AVE.		3.3 STREET ADDRESS 31	TYLARGO FLORIDA 3303	<b>-</b> ,
CITY-ST-ZIP	HOMESTEAD FL 33031				
TITLE	VD	☐ DELETE	4.1 TITLE P	$\Delta$	Change Addition
NAME	GREENE, JUANITA		4.2 NAME		
STREET ADDRESS	1 10 4 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TAVERNIER FL 33070		6.1 TITLE		<u> </u>
NAME	SKINNER, ROBERT	DELETE		14 KNOWLOS	Change Addition
STREET ADDRESS	2730 SW 3RD AVENUE-SUITE 20	IK	5.3 STREET ADDRESS	O MADOIRA RO.	
CITY-ST-ZIP	MIAMI FL	, <b>u</b>		AMORADA, FLORIDA 330	.21
TITLE	D D	Cociere	6.1 TITLE	ATTION J. C. TOTOL J.C.	
NAME	SUTTON, DEL LORICE	DELETE	62 NAME THE	OMAS SMITH 36 PRINCE LANG	Change Addition
STREET ADDRESS			2.2	26 PRINCE LANG	
	3333 GULF SHORE BLVD. N. AP	T. 303	6.3 STREET ADDRESS	PLOS, FLORION 34112	l

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, by on an attaching with an address.

ING DEFICER OR DIRECTOR

**FILED** 

Jul 09 1998 8:00am \*

Secretary of State