**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # 754287** 

PENSACOLA CHAPTER, INC., THE RETIRED OFFICERS AS SOCIATION.

Principal Place of Business P.O. BOX 4979

PENSACOLA FL 32507

Mailing Address

P.O. BOX 4979 PENSACOLA FL 32507

## **FILED** Mar 09, 1999 8:00 am Secretary of State

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22   27   28   30   30   5. Certificate of Status Desired   68.75 & 68.75 & 69.82 & 69. City & State   5. Certificate of Status Desired   69. Status Desired Desired Address of Current Registered Agent   69. Name and Address of Current Registered Agent   69. Name and Address of New Registered Agent   69. Status Desired   69. Status Desired Agent   69. Status Desired Registered Agent	wired Asy Ba Fees  Xde O4  sgistered SS IN 12
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City & State    City & State   28   28   28   5. Certificate of Status Desired   \$8.75 A Fee Rec   28   29   30   Trust Fund Contribution   35.00.]   Zip	iditional ulred Asy Be Fees Ade O4 Splistered Stered
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28 29 30 Trust Fund Contribution Added to 9. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Street Address (P.O. Box Number is Not Acceptable)  14. City PRSS AG   A FL 32514  15. 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 office or registered agent, to 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 and the fire purpose of Changing its another agent. I have been appointment as a registered Agent and the fire purpose of Changing its another agent and the fire purpose of Changing its another agent and the fire purpose of Changing its another agent and Address (P.O. Box Number is Not Acceptable)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. City-St-ZP  15. Purpose its purpo	ode O4 spistered stered
9. Name and Address of Current Registered Agent  BRADFORD, EDWARD M  1937 WOODBRIDGE DR  PENSACOLA FL 32514  84 City  PENSACOLA FL 32514  85 Zip C  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Received Agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  By City  PENSACOLA FL 32514  By City  PENSACOLA FL 32514  By City  PENSACOLA FL 32514  By City  By	egistered stered
BRADFORD, EDWARD M 1937 WOODBRIDGE DR PENSACOLA FL 32514  81  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the oppointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the oppointment as 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 with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Richard T. Ducoft  Signature, hyed or privad name of ageitand agent and the flappleachs.  PRESIDENT  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY-ST-ZP  PENSACOLA FL 32514  INCITY-ST-ZP  PENSACOLA FL 32514  INCITY-ST-ZP  PENSACOLA FL 32514  INCITY-ST-ZP  GULF SHORES AL 36947  ITILE  VD  MAKE  HEITER, TONY  STREET ADDRESS  CITY-ST-ZP  GULF SHORES AL 36947  ITILE  VD  MAKE  STREET ADDRESS  SPAS SHORES AL 36947  ITILE  VD  MAKE  STREET ADDRESS  SPAS SHORES AL 36947  ITILE  VD  MAKE  STREET ADDRESS  SPAS SHORES AL 36947  ITILE  VD  MAKE  STREET ADDRESS  SPAS SHORES AL 36947  AL CITY-ST-ZP  GULF SHORES AL 36947  ITILE  VD  MAKE  STREET ADDRESS  SPAS SHORES AL 36947  AL CITY-ST-ZP  GULF SHORES AL 36947  AL CITY-ST-ZP  PENSACOLA FL 32561  STREET ADDRESS  SPAS SHORES AL 36947  AL CITY-ST-ZP  PENSACOLA FL 32561  AL CITY-ST-ZP  PENSACOLA FL 32561	egistered stered
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14. I hereby certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information supplied with this filing does periquelity for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information stated in Section 119.07(3)(ii), Florida Statutes, I further certify the secti	

I to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

SIGNATURE: