

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 754480 (2)
1. Corporation Name

FLORIDA FOREST FESTIVAL, INC.



Principal Place of Business: 428 N. JEFFERSON ST. PERRY FL 32347
Mailing Address: P.O. Box 1062 Perry, FL 32347

3. Date Incorporated or Qualified: 10/03/1980
3a. Date of Last Report: 03/07/1995
4. FEI Number: 59-0772717
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

21. Principal Place of Business: Suite, Apt. #, etc.
22. City & State: Perry, FL
23. Zip: 32347
24. Country: Taylor

9. Name and Address of Current Registered Agent: PARKER, GREG 411 N. WASHINGTON ST. PERRY FL 32347

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code

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: _____ DATE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	VD	<input type="checkbox"/> DELETE
NAME	JOHNSON, DAVID	
STREET ADDRESS	428 N JEFFERSON ST	
CITY - ST - ZIP	PERRY FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	OLCOTT, RICK	
STREET ADDRESS	428 N JEFFERSON ST	
CITY - ST - ZIP	PERRY, FL 00000	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	DAY, EVELYN	
STREET ADDRESS	428 N. JEFFERSON ST.	
CITY - ST - ZIP	PERRY FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	BISHOP, CONNIE	
STREET ADDRESS	428 N JEFFERSON ST	
CITY - ST - ZIP	PERRY FL	
TITLE	MD	<input type="checkbox"/> DELETE
NAME	WILLIAMS, JOHN	
STREET ADDRESS	428 N JEFFERSON ST	
CITY - ST - ZIP	PERRY FL	
TITLE	PC	<input checked="" type="checkbox"/> DELETE
NAME	SELLARS, MARY	
STREET ADDRESS	428 N. JEFFERSON ST.	
CITY - ST - ZIP	PERRY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Scott, Anne E	
4.3 STREET ADDRESS	P.O. Box 1062	
4.4 CITY - ST - ZIP	Perry, FL 32347	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	PC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Johnson, Elvena	
6.3 STREET ADDRESS	P.O. Box 1062	
6.4 CITY - ST - ZIP	Perry, FL 32347	

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: Elvena P Johnson DATE: _____ DAYTIME PHONE #: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)