

5-1-97 B 5946 C
FILE NOW. FILING FEE IS \$61.25

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May 01 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mofham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 761425 (8)			
1. Corporation Name PENSACOLA ROSE SOCIETY, INC.			
Principal Place of Business 308 ALABAMA ST MILTON FL 32570 US		Mailing Address 308 ALABAMA ST MILTON FL 32570-4907 US	
2. Principal Place of Business 21 3701 DUNWOODY DR Suite, Apt. #, etc. 22		2a. Mailing Address 26 3701 DUNWOODY DR Suite, Apt. #, etc. 27	
City & State 23 PENSACOLA FL Zip 24 32503		City & State 28 PENSACOLA, FL Zip 29 32503	
Country 25 ESCAMBIA		Country 30 ESCAMBIA	
9. Name and Address of Current Registered Agent HYDUK, NORMAN M. 6207 WINDWOOD DRIVE PENSACOLA FL 32504			
10. Name and Address of New Registered Agent 81 Name STUMBAUGH, KATHY 82 Street Address (P.O. Box Number is Not Acceptable) 3701 DUNWOODY DR 83 84 City PENSACOLA FL 85 Zip Code 32503			
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 <i>Kathy Stumbaugh</i> DATE 4/20/97 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input checked="" type="checkbox"/> DELETE	
NAME	RICHARDS, MERNA		
STREET ADDRESS	308 ALABAMA ST		
CITY - ST - ZIP	MILTON FL		
TITLE	VD	<input checked="" type="checkbox"/> DELETE	
NAME	HYDUK, NORM		
STREET ADDRESS	6207 WINEWOOD DR		
CITY - ST - ZIP	PENSACOLA FL		
TITLE	VD	<input checked="" type="checkbox"/> DELETE	
NAME	BOWLES, JOHN		
STREET ADDRESS	312 DOGWOOD DR LOT 3		
CITY - ST - ZIP	PENSACOLA FL		
TITLE	SD	<input checked="" type="checkbox"/> DELETE	
NAME	NICHOLAS, FLORENCE		
STREET ADDRESS	9956 CANDLESTICK LN		
CITY - ST - ZIP	PENSACOLA FL		
TITLE	TD	<input type="checkbox"/> DELETE	
NAME	WHITE, JEAN F		
STREET ADDRESS	1702 E FISHER ST		
CITY - ST - ZIP	PENSACOLA FL		
TITLE	MD	<input type="checkbox"/> DELETE	
NAME	MENK, SALLY		
STREET ADDRESS	3610 TIBET DR		
CITY - ST - ZIP	GULF BREEZE FL		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME	STUMBAUGH, KATHY		
1.3 STREET ADDRESS	3701 DUNWOODY DR.		
1.4 CITY - ST - ZIP	PENSACOLA, FL 32503		
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME	TERESITA MAGHIRANG		
2.3 STREET ADDRESS	818 N. 65TH AVE.		
2.4 CITY - ST - ZIP	PENSACOLA, FL 32506		
3.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME	MERNA RICHARDS		
3.3 STREET ADDRESS	308 ALABAMA ST		
3.4 CITY - ST - ZIP	MILTON, FL 32570		
4.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME	LAURA PORTER		
4.3 STREET ADDRESS	5906 PRINCETON DR.		
4.4 CITY - ST - ZIP	PENSACOLA, FL 32526		
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		<input type="checkbox"/> Change <input 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 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: <i>Jean F. White</i> DATE 02/12/97 904/433-0228 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CR2E037 (9/96)