FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

N10650

(2)

FLORIDA COMMUNITY SERVICES CORP. OF WALTON COUNT

FILED Feb 04 1998 8:00am Secretary of State

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Principal Plac	ce of Business	Mailing Address					- 113511	 	atiai ailil a	811 81811 8	iail disit bidil	Didii dirii ifr	!!	
70 LOGAN LAI GRAYTON BUS SANTA ROAS	70 LOGAN LANE GRAYTON BUS CTR SANTA ROSA BEACH FL 32459				3. Date Incorporated or Qualified 08/07/1985									
US			US					4. FEI Num	₂₆₄₃₂₆₆			_	Applied For Not Applica	-
2. Principal F	Place of Business	2a. Mailing Address					- 60 7F							
21		26					5. Certificat	e of Status De	sired	×	7	Required		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.						Campaign Fin	-) Мау Ве		
22 City & State			27 City & State					Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association?						
23			28					Yes X No						
Zip	ip Country		Zip Coun			ountry		8. This corporation owes or has pald the current year Intangible						
24 25 9. Name and Address of Curren			29 30				Personal Property Tax due June 30. Yes X No 10. Name and Address of New Registered Agent							
	9. Name and	Address of Current	Register	red Agent		81 N	iame	10. Name ar	1d Address of	New Reg	gistered	Agent		
WILSON, DEWEY C JR										<u> </u>				
70 LOGAN LANE						82 S	treet Addr	ess (P.O. Box N	lumber is Not	Acceptab	le)			
SANTA ROSA BCH FL 32459						83								
						84 C	itv					85 Zi	o Code	
44.5											FL	_ 1 1 '		
office or r	to the provisions registered agent,	of Sections 617.0502 or both, in the State of and accept the obligat	and 617. of Florida.	.1508, Florida S Such change v	Statutės, tine was authoriz	above-na ed by the	amed corp e corporati	oration submits ion's board of di	this statement irectors. I here	for the puby accept	urpose of the app	of changing pointment a	its registere	ed
1	ım familiar with, a	and accept the obligat	tions of, S	Section 617.050	3, Florida St	atutes.				,				
SIGNATURE	Signature, typed or pr	fried name of registered agen	and title if a	pplicable.	(NOTE: Registe	ed Agent sig	anature require	ed when reinstating)			DATE			_
12.		OFFICERS AND			13				S/CHANGES T	O OFFIC		D DIRECTÖ	RS IN 12	_
IIITE	PD			DELETE	1,7	TITLE						Change	Addit	ion
NAME WILSON, DEWEY C.				1,2 NAME				<	~	٠٠٠ م	.n	•		ļ
STREET ADDRESS 9563 STATE HWY 83 CITY-ST-ZIP DE FUNIAK SPGS. FL						STREET ADD	RESS 4	76 5an anta Ro	Such	Hoerio	~ ~			
TITLE	ST ST				1.4 CITY-ST-ZIP		anto Ko	20 1060	XCD.	٣	<u> </u>	Additi	i	
NAME	WALDEN, MELISSA R					2.2 NAME						change	☐ Wanti	יוטנו ן
STREET ADDRESS						STREET ADD	RESS							- 1
CITY-ST-ZiP	DEFUNIAK SPRINGS FL			2.40										
TITLE	DPV			DELETE 3.			3.1 TITLE					Change	Additi	ion
NAME	ALFORD, DOUGLAS A.			3.2 N			1							
STREET ADDRESS	DEFUNIAL ADDITION TO			3.3 ST										
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NAME				□ beceie	I	iitle Name						L Change	Additi	IOD
STREET ADDRESS						STREET ADDI	erec							ľ
CITY-ST-ZIP		4.4 CITY-ST-ZIP												
TITLE				DELETE		TITLE						Change	Additi	ion
NAME					5.21	IÀME						•		
STREET ADDRESS					5.3	TREET ADDR	RESS							
CITY-ST-ZIP						UTY-ST-ZIP	,							
TILE			DELETE 6.1 TI									Change	Additio	.00
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STREET ADDRESS					TREET ADDR									
CITY-ST-ZIP	ertify that the infe	ormation supplied with	this filine	leus tot geob r		amption		Section 119 07/2	Wil Florida Ci	atitas I fi	wdb.cv.c.	arif. that th	- !	

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, or on an attachment with an address.

CICNIATURE.

. FETCHLIT) WE RECHURED. Wilson:

1/27198

850-231-5114