

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **N11272** (4)

1. Corporation Name

GULF BREEZE SERTOMA CLUB, INC.

95 JUN 14 AM 9:27

Principal Place of Business Mailing Address
102 EAST GARDEN STREET 102 EAST GARDEN STREET
PENSACOLA FL 32501 PENSACOLA FL 32501
US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
09/24/1985 06/24/1994

4. FEI Number Applied For
59-2587239 Not Applicable

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

MICHAEL D. TIDWELL
2717 GULF BREEZE PKWY.
GULF BREEZE FL 32581

10. Name and Address of New Registered Agent

81 Name Daniel Kopack, Jr.
82 Street Address (P.O. Box Number is Not Acceptable) 102 East Garden Street
83
84 City Pensacola FL 85 Zip Code 32501

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Daniel Kopack, Jr.* DATE 6/8/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

| | |
|-----------------|------------------------|
| TITLE | TD |
| NAME | MATT DANNHEISER |
| STREET ADDRESS | 504 N. BAYLEN STREET |
| CITY - ST - ZIP | PENSACOLA FL 32001 |
| TITLE | SD |
| NAME | MICHAEL TIDWELL |
| STREET ADDRESS | 2717 GULF BREEZE PKWY. |
| CITY - ST - ZIP | GULF BREEZE FL 32581 |
| TITLE | D |
| NAME | RADCLIFFE, DAVID |
| STREET ADDRESS | 3024 GULF BREEZE PKWY |
| CITY - ST - ZIP | GULF BREEZE FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---------------------|--------------------------|--|
| 1.1 TITLE | FD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME | George D. Williams | |
| 1.3 STREET ADDRESS | 401 Plantation Hill Road | |
| 1.4 CITY - ST - ZIP | Gulf Breeze, FL 32561 | |
| 2.1 TITLE | SD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | John D. Morgan | |
| 2.3 STREET ADDRESS | 101 Berry Avenue | |
| 2.4 CITY - ST - ZIP | Gulf Breeze, FL 32561 | |
| 3.1 TITLE | TD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | David Radcliffe | |
| 3.3 STREET ADDRESS | 957 Vestavia Way | |
| 3.4 CITY - ST - ZIP | Gulf Breeze, FL 32561 | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY - ST - ZIP | | |
| 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 recipient of 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 in an attachment with an address.

SIGNATURE: *George D. Williams* June 8, 1995 904-436-4470
Signature and typed or printed name of signing officer or director (Date) (Telephone Number)