

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 # **N36640** (3)
1. Corporation Name
APALACHICOLA BAY OYSTER FARMERS ASSOCIATION, INC



Principal Place of Business: **91 AVENUE C, P. O. BOX 144, APALACHICOLA FL 32320, US**
Mailing Address: **PO BOX 144, P. O. BOX 144, APALACHICOLA FL 32320, US**

3. Date Incorporated or Qualified: **02/15/1990**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-3015616**
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **JONES, DAVID, 91 AVENUE C, APALACHICOLA FL 32320**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	JONES, DAVID	
STREET ADDRESS	91 AVENUE C.	
CITY-ST-ZIP	APALACHICOLA FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	WINFIELD, JOHN	
STREET ADDRESS	P.O. BOX 946 N/A	
CITY-ST-ZIP	EASTPOINT FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	SQUARE, HELENE	
STREET ADDRESS	BOX 62 - ST. GEORGE ISLD N/A	
CITY-ST-ZIP	EASTPOINT FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	CHAPEL, GEORGE	
STREET ADDRESS	163 AVENUE B	
CITY-ST-ZIP	APALACHICOLA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BLOODWORTH, MINOR	
STREET ADDRESS	P.O. BOX 733 N/A	
CITY-ST-ZIP	EASTPOINT FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCARABIN, RICHARD	
STREET ADDRESS	120 - 22ND AVE.	
CITY-ST-ZIP	APALACHICOLA 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	<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 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: *George L. Chapel* July 24, 1996 (904) 653-9524
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **GEORGE L. CHAPEL - President** Date: _____ Daytime Phone # _____

CR2E037 (12/95)