

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 APR 27 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47201 (1)

1. Corporation Name

DAMAYAN, INC.

Principal Place of Business

**3900 LONG AND WINDING RD
TALLAHASSEE FL 32308**

Mailing Address

**9601 MICCOSUKEE ROAD
#16
TALLAHASSEE FL 32308
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1992

3a. Date of Last Report

04/21/1994

4. FBI Number

59-3113153

Applied For

Not Applicable

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. 189.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**ALSOP, PENNY F.
9601 MICCOSUKEE RD #16
TALLAHASSEE FL 32308**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **ALSOP, PENNY F**
STREET ADDRESS **9601 MICCOSUKEE RD. #16**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D**
NAME **GRAHAM-PEAVY, CAROL**
STREET ADDRESS **3608 TIPPERARY DR.**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D**
NAME **CARDEA, NORINE**
STREET ADDRESS **9601 MICCOSUKEE RD. #16**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D**
NAME **GOLINEAU, SARA**
STREET ADDRESS **RT. 1 BOX 188 R.**
CITY-ST-ZIP **QUINCY FL**

TITLE **D**
NAME **KREGGE, CAROL**
STREET ADDRESS **9601 MICCOSUKEE RD. #1**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D**
NAME **HARRISS, JUDITH**
STREET ADDRESS **RT. 1 BOX 653**
CITY-ST-ZIP **SOPCHOPPY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

**No longer on
the Board of Directors**

**No longer on the
BOARD OF DIRECTORS**

**No longer on the
BOARD OF DIRECTORS**

**HARRISS, Judith (D)
89 GREENBAUGH RD
Sopchoppy, FL 32358**

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 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: **Penny F. Alsop**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/95 (904) 921-1418
DATE

N47201

PLEASE ADD to the BOARD of DIRECTORS

SUSAN FLANAGAN (D)

8824 B FREEDOM ROAD

TALLAHASSEE, FL 32310

ALEXANDRA JAEGER (D)

306 N. MERIDIAN ST. #1

TALLAHASSEE, FL 32301

LILIAN McRAE (D)

290 ROSS ROAD #49

TALLAHASSEE, FL 32310

SUSAN PARKS (D)

1620 GREEN ST.

TALLAHASSEE, FL 32303