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# FILED
# Feb 12 1998 8:00am
# Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **N47201** **(1)**

1. Corporation Name
**DAMAYAN, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 3900 LONG AND WINDING RD<br>TALLAHASSEE FL 32308 | 9601 MICCOSUKEE ROAD<br>#16<br>TALLAHASSEE FL 32308<br>US |

3. Date Incorporated or Qualified: **02/04/1992**

4. FEI 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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 | 26 |
| 22 Suite, Apt. #, etc. | 27 Suite, Apt. #, etc. |
| 23 City & State | 28 City & State |
| 24 Zip / 25 Country | 29 Zip / 30 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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | D | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ALSOP, PENNY F | | 1.2 NAME | | |
| STREET ADDRESS | 9601 MICCOSUKEE RD. #16 | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TALLAHASSEE FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | HARRISS, JUDITH | | 2.2 NAME | | |
| STREET ADDRESS | 89 GREENBAUGH RD | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TALLAHASSEE FL | | 2.4 CITY-ST-ZIP | | |
| TITLE | D | ☒ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | GOLINVEAU, SARA | | 3.2 NAME | | |
| STREET ADDRESS | RT 1 BOX 188 R N/A | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | QUINCY FL | | 3.4 CITY-ST-ZIP | | |
| TITLE | D | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | JAEGON, ALEX | | 4.2 NAME | | |
| STREET ADDRESS | 306 NORTH MERIDAN #1 | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TALLAHASSEE FL | | 4.4 CITY-ST-ZIP | | |
| TITLE | D | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | PARKS, SUSAN | | 5.2 NAME | | |
| STREET ADDRESS | 1513 ATAPHA NENE | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TALLAHASSEE FL | | 5.4 CITY-ST-ZIP | | |
| TITLE | D | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | FLANAGAN, SUSAN | | 6.2 NAME | | |
| STREET ADDRESS | 8824B FREEDOM ROAD | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TALLAHASSEE FL | | 6.4 CITY-ST-ZIP | | |

CR2E037 (10/97)

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.

**SIGNATURE:** Penny F. Alsop 2/6/98