

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Feb 08, 1999 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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02-08-1999 90056 019 \*\*\*\*\*61.25

**DOCUMENT # N96000005857**

1. Corporation Name  
**LINCOLN HIGH SCHOOL ALUMNI ASSOCIATION, INCORPORATED**

Principal Place of Business POST OFFICE BOX 5915 GAINESVILLE FL 32602-5915	Mailing Address POST OFFICE BOX 5915 GAINESVILLE FL 32602-5915
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 11/12/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3415026
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WHITE, ALBERT E SCHOOL ALUMNI ASSOCIATION INCORPORATED 6423 N.W. 42ND LANE GAINESVILLE FL 32606		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE 11/12/1996	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WHITE ALBERT, E		1.2 NAME	
STREET ADDRESS 6423 N.W. 42ND LANE		1.3 STREET ADDRESS 59-3415026	
CITY-ST-ZIP GAINESVILLE FL 32606		1.4 CITY-ST-ZIP	
TITLE VPD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WILLIAMS, JO ANN		2.2 NAME	
STREET ADDRESS 3218 N.W. 46TH PL		2.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32605		2.4 CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RODRIGUEZ, LILLIAN J		3.2 NAME	
STREET ADDRESS 1226 N.E. 16TH PL		3.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32609		3.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WILLIAMS, EARL		4.2 NAME	
STREET ADDRESS 308 N.W. 53RD STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32607		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUTLER, LINDA J		5.2 NAME	
STREET ADDRESS 4112 N.W. 20TH TERRACE		5.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32605		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JACKSON-ROBBINS, BLANCHE		6.2 NAME	
STREET ADDRESS 727 N. W. 1ST STREET		6.3 STREET ADDRESS	
CITY-ST-ZIP GAINESVILLE FL 32601		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: Albert E. White DATE: Jan 15, 1999 DAYTIME PHONE #: 352-334-7111

CR2E037 (11/98)