

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001477

Entity Name: APALACHICOLA BAY AND RIVER KEEPER, INC.

Current Principal Place of Business:

232-B WATER STREET
APALACHICOLA, FL 32320

Current Mailing Address:

P.O. BOX 8
APALACHICOLA, FL 32329

FEI Number: 59-3550426

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TONSMEIRE, DANIEL L
232-B WATER STREET
APALACHICOLA, FL 32320 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR
Name CARBONE, JACK
Address PO BOX 973
City-State-Zip: EASTPOINT FL 32328

Title DIRECTOR
Name ASHLEY, DON
Address P.O. BOX 430
City-State-Zip: SOPCHOPPY FL 32358

Title PRESIDENT
Name HERZOG, TOM
Address P.O. BOX 1106
City-State-Zip: CARRABELLE FL 32322-1106

Title VICEPRESIDENT
Name ACKERMAN, GEORGIA
Address 8974 MEGANS LANE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name HARTMAN, BRADLEY
Address 155 PARADISE RD
City-State-Zip: HAVANA FL 32333

Title DIRECTOR
Name INZETTA, JOHN
Address 290 N BAYSHORE DR
City-State-Zip: EASTPOINT FL 32328

Title PRESIDENT
Name DIAMOND, CRAIG
Address 405 INGLEWOOD DR
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name ESTES, JOYCE
Address PO BOX 585
City-State-Zip: EASTPOINT FL 32328

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHANNON LEASE

EXEC DIRECTOR

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MIDDLEMAS, JOHN ROBERT
Address 718 BUNKERS COVE RD
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name SANDERS, BARBARA
Address 215 W 12TH ST
City-State-Zip: ST GEORGE ISLAND FL 32328

Title TREASURER
Name FRIEDMAN, MARK W
Address PO BOX 789
City-State-Zip: APALACHICOLA FL 32329

Title EXECUTIVE DIRECTOR
Name LEASE, SHANNON
Address 50 10TH STREET
City-State-Zip: APALACHICOLA FL 32320

Title DIRECTOR
Name TAYLOR, C. CHADWICK
Address PO BOX 315
City-State-Zip: GREENWOOD FL 32443

Title SECRETARY
Name JETTON, REBECCA
Address 501 BLAIRSTONE ROAD APT 425
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name KIENZLE, CHARLEY
Address 15 8TH STREET
City-State-Zip: APALACHICOLA FL 32320