

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001477

Entity Name: APALACHICOLA BAY AND RIVER KEEPER, INC.

Current Principal Place of Business:

301 MARKET 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:

ACKERMAN, GEORGIA
301 MARKET 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: GEORGIA ACKERMAN EXEC DIRECTOR

04/30/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name MCCORMICK, KATIE
Address 315 JOHNS DRIVE
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name JETTON, REBECCA
Address 2926 CROSS CREEK CT
City-State-Zip: TALLAHASSEE FL 32301

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

Title DIRECTOR
Name ROBINSON, CLAY
Address 330 KRAMER ST
City-State-Zip: CARROLLTON GA 30117

Title DIRECTOR
Name HILTON, DAVID
Address 2355 MARTIN ROAD
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR
Name ALBER, DODIE
Address 260 6TH STREET
City-State-Zip: APALACHICOLA FL 32320

Title TREASURER
Name MARCICH, IVO
Address 3014 WINDSOR WAY
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name BIGMAN, SID
Address 2007 EAST RANDOLPH CIR
City-State-Zip: TALLAHASSEE FL 32308

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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: BARBARA POWELL

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name ALIX, DIANE
Address 115 W F MAGERS ROAD
City-State-Zip: CRAWFORDVILLE FL 32327

Title PRESIDENT
Name POWELL, BARBARA
Address 00 GERANIUM TRACE
City-State-Zip: CRAWFORDVILLE FL 32327

Title DIRECTOR
Name PARKER CURRY, HOLLY
Address 1229 MITCHELL AVE
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name GOODSON, ALLISON
Address 6541 SPICEWOOD LANE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name ALBER, JOHN
Address 240 6TH STREET
City-State-Zip: APALACHICOLA FL 32320

Title DIRECTOR
Name PRICE, MIKE
Address 2023 SAND DOLLAR TR
City-State-Zip: ST GEORGE ISLAND FL 32328