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Mar 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **709229** (9)

1. Corporation Name

**PUTNAM-CLAY-FLAGLER ECONOMIC OPPORTUNITY COUNCIL
, INC.**

Principal Place of Business

Mailing Address

**702 N 19TH ST
STE. C
PALATKA FL 32177
US**

**702 N 19TH ST
STE. C
PALATKA FL 32177
US**

3. Date Incorporated or Qualified

06/29/1965

4. FEI Number

59-1119871

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 702 North 19th Street

26 Post Office Box 490

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite C

27

City & State

City & State

23 Palatka, Florida

28 Palatka, Florida

Zip

Country

Zip

Country

24 32177

25 USA

29 32178-0490

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MURRAY, HELEN S.
111 MURRAY RD. WEST
POMONA PARK FL 32181**

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

Helen S. Murray

3/4/98

Signature typed or printed name of registered agent and fee # applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE

NAME **RYLES, MEVLYN**
STREET ADDRESS **702 N 19TH ST STE. C**
CITY-ST-ZIP **PALATKA FL**

TITLE **PCA** ☐ DELETE

NAME **MURRAY, HELEN S**
STREET ADDRESS **111 MURRAY RD WEST**
CITY-ST-ZIP **POMONA PARK FL**

TITLE **TD** ☐ DELETE

NAME **CUNNINGHAM, ERNESTINE**
STREET ADDRESS **702 N 19TH ST**
CITY-ST-ZIP **PALATKA, FL 00000**

TITLE **SD** ☐ DELETE

NAME **CHAPPELL, ELSIE**
STREET ADDRESS **80 RAILROAD ST**
CITY-ST-ZIP **ESPANOLA FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

D ☐ Change ☒ Addition
BROOKS, ROBERT
103 POINT PLEASANT DRIVE
PALM COAST FL 32137

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: *Mevlyn Ryles*

3/4/98

328-1482 Ext. 10

CR2E037 (10/97)