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03-16-1999 90159 019 \*\*\*\*70.00

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 723069

1. Corporation Name

FLOTILLA 87, INC.

Principal Place of Business

LEMON BAY PARK  
BAY PARK DR.  
ENGLEWOOD FL 34223

Mailing Address

FLOTILLA 87, INC.  
BOX 5239  
ENGLEWOOD FL 34224-1428  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

04/04/1972

4. FEI Number

59-0798538

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

9. Name and Address of Current Registered Agent

CAHOW, JOHN C.  
7220 BRANDYWINE DRIVE  
ENGLEWOOD FL 34224

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE  
NAME SANDIFORD, JOHN W.  
STREET ADDRESS 754 MOBILE GARDENS  
CITY-ST-ZIP ENGLEWOOD FL 34224

TITLE V ☐ DELETE  
NAME SCHATTANER, NEAL P.  
STREET ADDRESS 2065 MISSISSIPPI AVE.  
CITY-ST-ZIP ENGLEWOOD FL 34224

TITLE D ☒ DELETE  
NAME JAMISON, FLOYD L  
STREET ADDRESS 8320 CREEK VIEW LANE  
CITY-ST-ZIP ENGLEWOOD FL 34224

TITLE TD ☐ DELETE  
NAME CAHOW, JOHN C.  
STREET ADDRESS 7220 BRANDYWINE DR.  
CITY-ST-ZIP ENGLEWOOD FL

TITLE D ☒ DELETE  
NAME FOSTER, STANLEY J  
STREET ADDRESS 7472 ESCONDIDO ST  
CITY-ST-ZIP ENGLEWOOD FL 34224

TITLE SD ☒ DELETE  
NAME HAYHURST, LEHA R.  
STREET ADDRESS 999 OXFORD DRIVE S.  
CITY-ST-ZIP ENGLEWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME SCHATTAUER, NEAL P  
1.3 STREET ADDRESS 2064 MISSISSIPPI AVE  
1.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

2.1 TITLE V ☒ Change ☐ Addition  
2.2 NAME CAHOW, JOHN C.  
2.3 STREET ADDRESS 7220 BRANDYWINE DR.  
2.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

3.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME MECKENBERG, GERALD L.  
3.3 STREET ADDRESS 7388 SNOW DR.  
3.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

4.1 TITLE TD ☐ Change ☒ Addition  
4.2 NAME RIENKS, JACK W.  
4.3 STREET ADDRESS 1921 NEPTUNE DR.  
4.4 CITY-ST-ZIP ENGLEWOOD, FL 34223

5.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME WILSON, ARTHUR J.  
5.3 STREET ADDRESS 7234 MAMOUTH ST.  
5.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

6.1 TITLE S/D ☐ Change ☒ Addition  
6.2 NAME SCHMIDT, ROBERT W.  
6.3 STREET ADDRESS 16 LONG MEADOW CT.  
6.4 CITY-ST-ZIP ROTONDA WEST, FL 33947

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: Neal P. Schattauer NEAL P. SCHATTAUER, 02/09/99 941-475-3616  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/98)