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Feb 16 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 # **724449** (4)

1. Corporation Name

OKALOOSA-WALTON CHILD CARE SERVICES, INC.

Principal Place of Business

Mailing Address

**107 TUPELO AVENUE
P.O. BOX 2258
FT WALTON BEACH FL 32549**

**107 TUPELO AVENUE
P.O. BOX 2258
FT WALTON BEACH FL 32549**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/28/1972

4. FEI Number

59-1434341

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

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 **PD** ☒ DELETE

NAME **ROSER, ELENA**
STREET ADDRESS **916 47TH ST**
CITY-ST-ZIP **NICEVILLE FL**

TITLE **VD** ☒ DELETE

NAME **GREEN, VIRGINIA**
STREET ADDRESS **921 DENTON BLVD APT 1706**
CITY-ST-ZIP **FORT WALTON BCH FL**

TITLE **SD** ☒ DELETE

NAME **FOX, EVELYN**
STREET ADDRESS **950 RUE DE PALM**
CITY-ST-ZIP **NICEVILLE FL**

TITLE **TD** ☒ DELETE

NAME **COBBS, DANIEL**
STREET ADDRESS **137 HOSPITAL DR**
CITY-ST-ZIP **FT WALTON BCH FL**

TITLE **D** ☐ DELETE

NAME **GRINSTED, PATRICIA**
STREET ADDRESS **158 COUNTRY CLUB RD**
CITY-ST-ZIP **SHALIMAR FL**

TITLE **D** ☒ DELETE

NAME **EBEOGLU, SHERYL**
STREET ADDRESS **154 COUNTRY CLUB RD**
CITY-ST-ZIP **SHALIMAR FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition

1.2 NAME **GREEN, VIRGINIA**
1.3 STREET ADDRESS **921 DENTON BLVD APT 1706**
1.4 CITY-ST-ZIP **FORT WALTON BCH FL 32547**

2.1 TITLE **VD** ☐ Change ☒ Addition

2.2 NAME **WILLIAMS, CAROLANE, DR.**
2.3 STREET ADDRESS **100 COLLEGE BLVD**
2.4 CITY-ST-ZIP **NICEVILLE FL 32578**

3.1 TITLE **SD** ☐ Change ☒ Addition

3.2 NAME **FEDONCZAK, TERRI W**
3.3 STREET ADDRESS **360 JASMINE AVENUE**
3.4 CITY-ST-ZIP **VALPARAISO FL 32580**

4.1 TITLE **TD** ☐ Change ☒ Addition

4.2 NAME **HILL, KELLY, C.P.A.**
4.3 STREET ADDRESS **P.O. BOX 5438 N/A**
4.4 CITY-ST-ZIP **DESTIN FL 32540**

5.1 TITLE **D** ☐ Change ☒ Addition

5.2 NAME **ROSER, ELENA**
5.3 STREET ADDRESS **916 47TH ST**
5.4 CITY-ST-ZIP **NICEVILLE FL 32578**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.0502(9), Florida Statutes. 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:

Virginia Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Green, Pres. 1/08/98

(850)833-9330

Daytime Phone # 607022

CR2E037 (10/97)