

FILED
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Secretary of State

05-13-1999 90049 020 ****61.25

**NONPROFIT
 CORPORATION
 ANNUAL REPORT
 1999**



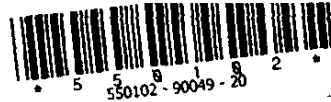
FLORIDA DEPARTMENT OF STATE
Katherine Morris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 726615

1. Corporation Name

THE PALM COAST BUCKET BRIGADE, INC. ✓

Principal Place of Business Mailing Address
 PALM COAST PARKWAY
 POST OFFICE BOX 350048
 PALM COAST FL 32135-0048



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 P.O. Box 353676		4. FEI Number	
22 City & State		27 Suite, Apt. #, etc.		59-3414199 ✓	
23 Zip		28 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Country		29 Zip		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
25 Country		30 Zip		Trust Fund Contribution ☐	

9. Name and Address of Current Registered Agent

GERARD FORTE
 55 BRADMORE LANE
 PALM COAST FL 32137

10. Name and Address of New Registered Agent

81 Name **JULES KWIATKOWSKI**
 82 Street Address (P.O. Box Number is Not Acceptable)
 7 - BASSETT LN.
 83 PALM COAST 32137
 84 City PALM COAST FL 85 Zip Code 32137

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 Jules Kwiatkowski JULES KWIATKOWSKI 5/1/99
(NOTE: Registered Agent signature required when remaining)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	HOWARD PEIFFER ☒ DELETE	1.1 TITLE	PRESIDENT - Director ☒ Change ☐ Addition
NAME	46-COMORANT CT	1.2 NAME	JULES KWIATKOWSKI
STREET ADDRESS	PALM COAST FL 32137	1.3 STREET ADDRESS	7 BASSETT LANE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	PALM COAST FL 32137
TITLE D	CONSTANCE MOORE ☒ DELETE	2.1 TITLE	VICE PRESIDENT Director ☐ Change ☐ Addition
NAME	46-BLAIRSVILLE DR	2.2 NAME	BRIAN McNULTY
STREET ADDRESS	PALM COAST FL 32137	2.3 STREET ADDRESS	23 BARKLEY LANE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	PALM COAST FL 32137
TITLE SD	HENRY GENSCHE ☒ DELETE	3.1 TITLE	SECRETARY Director ☒ Change ☐ Addition
NAME	44-WOODFIELD DR.	3.2 NAME	LARRY RUGGIERI
STREET ADDRESS	PALM COAST FL 32137	3.3 STREET ADDRESS	89 FOSTER LANE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	PALM COAST FL 32137
TITLE PD	EIVA LEE ☒ DELETE	4.1 TITLE	TREASURER Director ☒ Change ☐ Addition
NAME	1 BISCAYNE PLACE	4.2 NAME	EIVA LEE
STREET ADDRESS	PALM COAST FL 32137	4.3 STREET ADDRESS	1 BISCAYNE PLACE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	PALM COAST FL 32137
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

Jules Kwiatkowski EIVA LEE 4/24/99 (904) 445-7305
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JULES KWIATKOWSKI **EIVA LEE**

CORP 97 111001