FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

729808

(6)

AIRBOAT AND HALFTRACK CONSERVATION CLUB OF PALM BEACH COUNTY, INC.

Principal Place of Business

Mailing Address

P O BOX 17038 WEST PALM BEACH FL 33416 P O BOX 17038

WEST PALM BEACH FL 33416-7038

FILED Apr 25 1997 8:00am Secretary of State



					_				
								3. Date Incorporated or Qualified 05/30/1974 3a. Date of Last Report 03/04/1996	
-	Principal Place of	f Business	2a. Mailing Address					4. FEI Number NOT APPLICABLE Applied For	
21	Sulte, Apt. #, etc.		26	uite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·			Not Applicable	
22			27	–				5. Certificate of Status Desired	
City & State			C	City & State			··· · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
	Zip	Country	z	Ϊp	Country			8. This corporation has liability for intangible tax under s. 199.032,	
24		25	29	· · · <u> </u>	30	_		Florida Statutes Yes No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
						81 Name			
AMENDOLA, MICHAEL J. 224 DATURA ST., SUITE 316						82 Street Address (P.O. Box Number is Not Acceptable)			
	W. PALM BEA					83			
1							City	■■ 85 Zip Code	
		A	1 0 1 0	1500 5: 11 5		Ш		FL B 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 Signalure, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12		OFFICERS AND		· · · · · · · · · · · · · · · · · · ·	13.		in signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITI				DELETE	111			Dresident I Change Addition	
NAI	ME SU	ILLIVAN, KENNETH		/	1.2 N	IAME		Paimer, Akan	
STR	EET ADDRESS 13	660 49TH STREET, NORTH			1.3 \$	STREET	ADDRESS	Paimer, Alan 5200 Jessery Lane	
CIT	Y-ST-ZIP RO	YAL PALM BEACH FL		(1.40	CITY-S	1 - <i>Z</i> IP	mangonia Park, FL 33407	
TIT				DELETE	21 T	ITLE		13+ VP (D) Change Addition	
NA		lmer, alan		/	22 N	IAME		Stossel Michael	
STA		00 JEFFERY LANE			2.3 \$	TREET	address	12351 59th St. N.	
		NGONIA PARK FL				CITY-S	T-ZIP	Royal Palm Beach, FL 33411	
TITE				DELETE	311			2nd VP. (D) Change Addition	
NA		OSSEL, MICHAEL 4 ASPEN DR		·		IAME		Bill Wallace 1818 Australian Ave. Ste. 400	
	140	4 ASPEN DA EST PALM EBACH FL					address	1818 Mustialiar I rection of	
TITI		COT PAUM EDAUN FL		DELETE	3.4. I 4.1 T	CITY-S	IT-ZIP	West Pam Black, RL 33409 Change Addition	
NAI		OWNS, BOB		ניין מנגנונ		NAME		C change C Abundon	
		755 48TH COURT, NORTH					ADDRESS		
		YAL PALM BEACH FL		_		SITY-SI			
TITE		THE THEM DENOTITE		DELETE	511		1 - 211	Secretary Addition	
NAJ	ME SV	VINK, BRYAN		Γ	5.2 N	IAME		Debrowski, Marcy	
		664 ORANGE GROVE BLVD		•			ADDRESS	12085 Acapulco Avenue	
		XAHATCHEE FL				HTY-SI	I - ZIP	Secretary Debrowski, Marcy 12085 Acapulco Avenue Palm Beach Gardens, Fl 33410	
TITE				☐ DELETE	6.1 T			Change Addition	
NAJ	ME MI	TZELFELD, CHARLES			6.2 N	IAME			
STA		160 41ST RD N			6.3 \$	IREE1	ADDRESS		
CIT	Y-St-ZIP LO	XAHATCHEE FL			6.4 0	HTY-ST	T - ZIP		
4.4	I de beselve en	if that the information rupplied				_		details Continued to 07/9//) Floride Ctet des I forther matter than the	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 Statules; and that my name appears in Block-12 or Block 13 if changed, or one as attachment with an address.

511/11/21/20