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**May 10, 1999 8:00 am**  
**Secretary of State**

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**DOCUMENT #** 736489 ✓

1. Corporation Name

OCEANWAY IMPROVEMENT COUNCIL, INC.

Principal Place of Business

Mailing Address

OCEANWAY IMPROVEMENT  
COUNCIL, INC.

12205 SAGO RD  
Jacksonville, FL 32218

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21

26

07/28/1976

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

22

27

59-1712668

Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

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

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HANSEN, W C  
12540 PULASKI RD.  
JACKSONVILLE, FL 32218

81 Name

HARRY J. WAGNER

82 Street Address (P.O. Box Number is Not Acceptable)

83

13659 DUNN CREEK RD.

84 City

JACKSONVILLE

FL

85 Zip Code  
32218

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 Harry J. Wagner

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE  
NAME PRESIDENT  
STREET ADDRESS HANSEN, W C  
CITY-ST-ZIP 12540 PULASKI RD.

1.1 TITLE PRESIDENT ☒ Change ☐ Addition  
1.2 NAME HARRY J. WAGNER  
1.3 STREET ADDRESS 13659 DUNN CREEK RD.  
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE ☐ DELETE  
NAME VICE-PRESIDENT  
STREET ADDRESS R. MCDOWELL  
CITY-ST-ZIP 203 COLLEN RD.  
JACKSONVILLE, FL 32218

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME SECRETARY  
STREET ADDRESS HARRY J. WAGNER  
CITY-ST-ZIP 13659 DUNN CREEK RD.  
JACKSONVILLE, FL 32218

3.1 TITLE Secretary ☒ Change ☐ Addition  
3.2 NAME BEVERLY LUKSHA  
3.3 STREET ADDRESS 13516 COLLEN RD  
3.4 CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE ☐ DELETE  
NAME DIRECTOR  
STREET ADDRESS REESE, STEVE  
CITY-ST-ZIP 2312 WATERBLUFF RD.  
JACKSONVILLE, FL 32218

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME DIRECTOR  
STREET ADDRESS FRANK LUKSHA  
CITY-ST-ZIP 13516 COLLEN RD.  
JACKSONVILLE, FL 32218

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME B. LUKSHA (DIRECTOR)  
STREET ADDRESS 13516 COLLEN RD.  
CITY-ST-ZIP JACKSONVILLE, FL 32218

6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME DIRECTOR  
6.3 STREET ADDRESS W C HANSEN  
6.4 CITY-ST-ZIP 12540 PULASKI RD  
JACKSONVILLE, FL 32218

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: Harry J. Wagner, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 757-0571

Date

Daytime Phone #

CR2E037 (1/198)