

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra M. Morthain Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **738737** (6)
1. Corporation Name
GULF AREA GARDEN CLUB OF FORT WALTON BEACH, INC.



Principal Place of Business BROOKS-BEAL CENTER 100 NW BEAL PKWY FORT WALTON BCH FL 32547 US		Mailing Address HILDA I. MCGEE 333 SUDDUTH CR NE FORT WALTON BCH FL 32548 US		3. Date Incorporated or Qualified 04/19/1977
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-6570430
21. Brooks-Beal Center	26. Hilda I. McGee	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
22. 100 NW Beal pkwy	27. 333 Sudduth Cr, NE	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
City & State	City & State	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		
23. Fort Walton Bch, FL 32547	28. Fort Walton Bch, FL 32548			
Zip	Country			
24. Okaloosa	29. Okaloosa			
City	Country			

9. Name and Address of Current Registered Agent MCGEE, HILDA I 333 SUDDUTH CIRCLE NE FORT WALTON BCH FL 32548		10. Name and Address of New Registered Agent	
		81. Name MCGEE, HILDA I.	
		82. Street Address (P.O. Box Number is Not Acceptable) 333 SUDDUTH CIRCLE	
		83. City FORT WALTON BCH.	85. Zip Code FL 32548

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 Hilda I. McGee (NOTE: Registered Agent signature required when reinstating) DATE 3-6-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
NAME	STREET ADDRESS	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
CITY-ST-ZIP		2.1 TITLE	2.2 NAME
		2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	NAME	3.1 TITLE	3.2 NAME
NAME	STREET ADDRESS	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
CITY-ST-ZIP		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
NAME	STREET ADDRESS	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
CITY-ST-ZIP		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	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.

SIGNATURE: Mazie L. Glover Hilda I. McGee
March 6, 1998

CR2E037 (10/97)