## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham .

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744910

(1)

## FLORIDA ASSOCIATION OF SOIL AND WATER CONSERVATI ON DISTRICT SUPERVISORS, INC.

Principal Plac	e of Business	Mailing Address							
16806 NW 40TH	16806 NW 40TH PLACE	:							
NEWBERRY FL 32669		NEWBERRY FL 32669-2002							
						3. Date Incorporated or Qualified 11/13/1978		te of Last F 3/13/199	
	face of Business	2a. Mailing Address			4. FEI Number FO. CEC 4020	<u> </u>	<del></del>	pplied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.			59-6564928		<del></del>	ot Applicable	
22	4, 010.	27			5. Certificate of Status Desired			Additional equired	
City & State		City & State			6. Election Campaign Financing			May Be	
23		28			Trust Fund Contribution		Added	to Fees	
Zip	Country Zip		Country			8. This corporation has liability for Intangible tax under s. 199,032,			
24   25   29   30   9. Name and Address of Current Registered Agent				Florida Statutes					
			ε	31	Name			Horix	
FORD, TI		82 Street Ac			ddress (P.O. Box Number is Not Acceptable	(a)			
RT 1 BO					0,001710	actives (r.o. box Homosi is Not Acceptable			
BRYCEVI	LLE FL 32009		8	33					
			ε	14	City	<del></del>	FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statutes	the abo	OVO.	-named co	orporation submits this statement for the po		changing i	ts registered
agent. I a	m familiar with, and accept the other	tor Florida. Such change was aut kions of, Section 617.0503, Flork	norized Ia Statu	by tes.	the corpor	orporation submits this statement for the puration's board of directors. I hereby accep			registered
SIGNATURE	Mille	7					17-9	7	
12.	Signature, typed or printed name of registered as OFFICERS AN				quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG AND	DIRECTOR	20 IN 12	
TITLE	D	DELETE	1.1 TITLE		· · · · · · · · · · · · · · · · · · ·	ADDITIONS OF IANGES TO OFFIC	ENS AND	Change	Addition
NAME	THOMAS R. FORD		1.2 NAME				•	•	
STREET ADDRESS	RT. 1, BOX 1077 N/A		1.3 STREE		ADDRESS				
CITY-ST-ZIP	BRYCEVILLE FL		1.4 CITY		- ZIP				
TITLE	VD	DELETE	2.1 TITLE		•		ļ	Change	Addition
NAME	FORD, TIM 5411 ST. HELENA ROAD		2.2 NAME						
STREET ADDRESS CITY-ST-ZIP	LAKE WALES FL 33853	•	2.3 STREE 2.4 CITY						
TITLE	PD	DELETE	3.1 TITLE		)-ZIF			Change	Addition
NAME	MICHAEL STOKES	•	3.2 NAME						
STREET ADDRESS	540 WEST MILL STREET		3.3 STREET		ODRESS				
CITY-ST-ZIP	BALDWIN FL		3.4. CITY-						
TITLE	SD	☐ DELETE	4.1 TITLE			SD Tack D		Change	Addition
NAME	TUCKER, CHARLES		4. 2 NAN		G	harles Tucker N/A			
STREET ADDRESS	P.O. BOX 766 Land-O-lakes Fl		4.3 STREE		DDRESS	Land O'Lakes, FL			
CITY-ST-ZIP TITLE	VD	☐ DELETE	4.4 CITY- 5.1 TITLE		-217 1	Luis Greates, Fe		Change	Addition
NAME	HENDERSON, TED		5.2 NAME				. '	und oranigo	، مناسب
STREET ADDRESS	1540-68TH PLACE				ADDRESS				
CITY-ST-ZIP	LIVE OAK FL		5.4 CITY-		-ZIP				
TITLE	D	☐ DELETE	6.1 TITLE			5		Change	Addition
NAME	DOROTHY LEWIS,		6.2 NAM	ΙĔ	Ī	corothy Lewis NA			
STREET ADDRESS	ROUTE 1, BOX 233		6.3 STRE	ET A	ADDRESS	RA. 1 188X 203 3724			

14. 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 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 from an attachmost with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-97

904-266-4784

**FILED** 

Feb 17 1997 8:00am

Secretary of State