SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98; \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 746601

PENSACOLA-ESCAMBIA CLEAN COMMUNITY COMMISSION, I

FILED Jul 08 1998 8:00am 8 Secretary of State

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NC.				
Principal Place of Business Malling Address				
312 W MAIN ST 312 W MAIN ST PENSACOLA FL 32501 PENSACOLA FL 32501				Date Incorporated or Qualified 04/03/1979
				4. FEI Number Applied For 59-1863230 Not Applicable
2. Principal F	Place of Business	2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional Fee Regulred
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	te	City & State		7. Is this nonprofit corporation a homeowners association?
Zip 24	Country 25	Zip 3	Country	This corporation owes or has paid the current year lotangible Personal Property Tax due June 30. Yes
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent
81 Name ACCOR no. 4				MCCORMICK, GLORGE H.
O'KEEFE, RAYMOND W				Address (P. 9 Box Number is Not Acceptable)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
PENSACC)LA FL 32501		63	
	?			ENGACOLA FL 85 32501
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.				
agent. I am famillar with, and accept the obligations of, section 617,0503, forida Statutes.				
SIGNATURE GREATERS H. MCCORMICK Greater Agent and tills if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE				
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CD	DELETE	1.1 TITLE	Change Addition
NAME	THOMPSON, R. CLARK		1.2 NAME	Committee (Committee)
STREET ADDRESS	700 S. PALAFOX ST		1.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32501		1.4 CITY-ST-ZIP	
TITLE	VCD	DELETE	2.1 TITLE	Change Addition
NAME	HO(LAND, R. SCOTT	—	2.2 NAME	· · · ·
STREET ADDRESS	312 W MAIN ST		2.3 STREET ADDRESS	321 S. ALLANIZ ST
CITY-ST-ZIP	PENSACOLA FL 32501		2.4 CITY-ST-ZIP	
TITLE	TD '	DELETE	3.1 YITLE	Change Addition
NAME	GAUT, KATHY		3.2 NAME	
STREET ADDRESS	930 GERHERT DR		3.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32503		3.4 CITY-ST-ZIP	
TITLE	SO .	DELETE	4.1 TITLE	Change Addition
NAME	BOONE, LAVONE		4.2 NAME	
STREET ADDRESS	4950 WOODCLIFFE DR.		4.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32504		4.4 CITY-ST-ZIP	
TITLE	D DAVIOUD W	DELETE	6.1 TITLE	D Change Addition
NAME	O'KEEFE, RAYMOND W		5.2 NAME	FILL KINGE GEORGE TE I PAR.
STREET ADDRESS	312 W MAIN ST		5.3 STREET ADDRESS	MCCORMICK GEORGE H. Change Addition 1166 SEABRÉEZE LANE GULF BREEZE FL 32561
CITY-ST-ZIP	PENSACOLA FL 32501	63	5.4 CITY-ST-ZIP	
TITLE	TD	DELETE	6.1 TITLE	Change Addition
NAME	HOLLAND, SCOTT R	I	6.2 NAME	
STREET ADDRESS	321 & ALCANIZ ST	į	6.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32501		8.4 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 the end 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 further 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.