


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90350 005 ****61.25

DOCUMENT # 752294	
1. Entity Name YAUPON GARDEN CLUB, INC.	

Principal Place of Business 302 AVENUE FN CARRABELLE FL 32322 US	Mailing Address P. O. BOX 727 LANARK VILLAGE FL 32323-0727 US
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MOORE CR2E037 (11/03)

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 1372 Suite, Apt. #, etc.	
City & State LANARK VILLAGE, FL		City & State LANARK VILLAGE, FL	
Zip 32323	Country 1372	Zip 32323	Country 1372

4. FEI Number 65-0095045	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GARRISS, ANN 37-4 PINE STREET P.O. BOX 421 LANARK VILLAGE FL 32323	
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7. Name and Address of New Registered Agent Name DORRIER, JANET M. Street Address (P.O. Box Number is Not Acceptable) 33-4 PARKER AVE P.O. Box 458 City LANARK VILLAGE FL Zip Code 32323	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Janet M. Dorrier* **4-28-04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT DORRIER, JANET 33-4 PARKER AVE PO BOX 458 LANARK VILLAGE FL 32323 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT DOWLING, SUSANNE 3-2 PARKER AVE PO BOX 1286 LANARK VILLAGE FL 32323 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CLARK, DOROTHY 7-6 PARKER AVE PO BOX 1352 LANARK VILLAGE, FL. 32323 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, DOROTHY 3 PINE STREET PO BOX 727 LANARK VILLAGE FL 32323 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROBERTS, BETTY 3-2 PARKER AVE P.O. Box 1286 LANARK VILLAGE, FL 32323 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, DOROTHY L. 3 PINE ST. PO BOX 727 LANARK VILLAGE FL 32323 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHANDLER, JOELLEN 55-6 PARKER AVE P.O. Box 1372 LANARK VILLAGE, FL. 32323 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *JoEllen Chandler* **JOELLEN CHANDLER** **4-28-04** **850-697-8544**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #