NONPROFIT CORPORATION ANNUAL REPORT

1999

2. Principal Place of Business



2a. Mailing Address

FLORIDA DEPARTMENT. OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

FLORIDA WOODWORKERS ASSOCIATION, INC.

Principal Place of Business Mailing Address P.O. BOX 1023 P.O. BOX 1023 FT WALTON BCH FL 32547 FT WALTON 8CH FL 32547

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90016 004 ****61.25



3. Date Incorporated or Qualifed

Suite, Apt. #, etc. 2 Suite, Apt. #, etc. 3 Suite, Apt. #, etc. 4 Suite, Apt. #, etc. 5	<u></u>		26			05/29/1960			
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9. Name and Address of Current Registered Agent St. Name	Ā	25 29				Trust Fund Contribution	Added to Fees		
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LESUE, TOM 1816 RATTAN PALM NICEVILLE FL 32578 19. Pursuant to the provisions of Sections 617,0502 and 817,1508, Florida Statutas, the above-named corporation submits statument for the purpose of changing its register of agent, or both, in the Statut of Priodic. Such change was authorized by the corporation's social of directors. I hereby accept the supportment as registered agent, or both, in the Statut of Priodic. Such change was authorized by the corporation's social of directors. I hereby accept the supportment as registered agent, and accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 617,0503. Priodic Statutas. SIGNATURE PC+CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 817,0508. Priodic Statutas. SIGNATURE PC-CR Us 10 CW C1 Signature, types of priodic accept the collegation of Sections 817,0508. Priodic Statutas. INTER ADDRESS 10 CW C1 CW C1 Signature, types of priodic accept the collegation of Sections 817,0508. Priodic Statutas. SIGNATURE DELETE 11 TIME Display Delete 11 TIME Display Delete 12 TIME Display Displ					Name	* PETER Wolniewich			
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## City	,			106 Wood bin-e Clocile					
1. Pursuant to the provisions of Sections 617.0502 and 817.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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, and accept the obligations of Section 617.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am a manifally with, and accept the obligations of Section 617.0502. Florida Statutes agent agent of the obligations of Section 617.0502. Florida Statutes agent agent of the obligations of Section 617.0502. Florida Statutes, the above-named corporations board of directors, I hereby accept the appointment as registered agent. I have a proporation of the provision of the provi			83				j		
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19, Pursuant to the provisions of Sections 17,0502 and 817,1508, Florida Statutes, the above-named corporation abunits this statement for the purpose of changing its register of office or registered agent, or both, in the Statu of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the approach agent age			·		1 Fact		L 32	544	
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14. I hereby cartify 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.