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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758651

(4)

JOHN'S PASS SEAFOOD FESTIVAL, INC.

Principal	Place o	f Business	

Mailing Address

FILED
Jul 21 1997 8:00am
Secretary of State

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Principal Plac	e of business	Malling Address					-
12957 GULF BLVD E 12957 GULF BLVD E							
Madeira Beac US	CH FL 33708	MADEIRA BEACH FL 33708 US	3-2656				
		00	_		3. Date Incorporated or Qualified 06/04/1981	3a. Date of Last F 05/25/19	Report 396
2. Principal P	Place of Business (ALE 7)	26. Mailing Address 26. 150-128	Bole:	71)	4. FEI Number 59-2858359	<u> </u>	Applied For
Suite, Apt.	# elc.	Suite, Apt. #, etc.	74000				lot Applicable Additional
22		27			5. Certificate of Status Desired		Required
CINASA	the second	City & State	-> /		6. Election Campaign Financing	\$5.00	May Bo
23 //10	121CA SEPORT	28/ /KEIRA	Dent		Trust Fund Contribution		to rees
24 337/	Countly 25	2023718	30 / NE/	/41	This corporation has liability for in Florida Statutes	ntangible tax under s Yes [] No	s. 199.032,
24 9 10	9: Name and Address of Current	Registered Agent	130 7 7 7 027	7~	10. Name and Address of New Reg		
	*		81 Nai	rey/	101 1 / m	100	
BRAWNE	er, Lyn 🕝		82 Stre	700	MEEN H. LIFE	<u> </u>	
	ULF BLVD E		62 300	150	ss (P.O. Box Number is Not Acceptab	<i>9</i> ".	
	A BEACH FL 33708		63	mil	as Report (1/A 33;	72
	•		84 City	(I WAGE	DISTRUT, F		Code
			[]		,		
11. Pursuant	to the provisions of Sections 617.0502 registered agent, or both, in the State of impamiliar with and accept the pulical	and 617.1508, Florida Statut	es, the above-nan	ned corpo	ration submits this statement for the p	urpose of changing	its registered
agent. I a	m amiliar with and accept the phligat	ions of Section 617,0503 FL	prior Statutes.	corporatio	r's board of directors. Thereby accep	t the appointment as	5 registered • 7
SIGNATURE	× Kack (0)	WTY OOK	1200			19-9 1	/
	Signature, typy U or printed name of registered agent		E: Registered Agent sign	ature required		DATE	
12.	OFFICERS AND	DIRECTORS	13.	20	ADDITIONS/CHANGLS TO OFFIC	ERS AND DIRECTO	Addition
NAME	BRAWNER, LYN	, Dell'IL	1.2 NAME	1//	COOPE INTHISERRY		
STREET ADDRESS	12957 GULF BLVD E		1.3 STREET ADDRE	[75	0-128 July	-17eside	T. DIR
CITY-ST-ZIP	MADEIRA BEACH FL	_	1.4 CITY-ST-7IP	" M	PODEICH BEACH, Flix		•
TITLE	VO	DELETE	SATURA VICE	- m	aller Parall	Change	Addition
NAME	MCLEAN, MICHAEL K	,,	2.2 NAME PRES	0///	CHOSE, NOVAJA	Vice-Apel	deAT
STREET ADDRESS	208 JOHOS PASS BOARDWAL	K	2.3 STREET ADDRE		901 Oilling Duc	- , , , , , , ,	The party was
CITY-ST-ZIP	MADEIRA BEACH FL	_	2. 4 City-St-ZiP	111	Ideica LEACH Flo 3.	328	
TITLE	SD	DELETE	3.1 TITLE Secy		ord ToriNE	Change	Addition
NAME	MCDOLE, KATHLEEN H.		3.2 NAME TY SAS	3	4 BOARDWAKETINEE	SEWIT	FOR IN
STREET ADDRESS	150-128TH AVE W		3.3 STREET ADDRE	SSZ	Vd 2	7//	" I DI
CITY-ST-ZIP	MADEIRA BEACH FL		3.4. CITY- S1 - 2IP	1/1	DUCICA EXACH, 1/A 3	3708	
TITLE	TO DETERMINE	DELETE	4.1 TITLE		,	Change	Addition
NAME	MAGADEY, PETER		4.2 NAME				į
STREET ADDRESS	13015 GULF BLVD E		4.3 STREET ADDRE	SS			
CITY-ST-ZIP	MADEIRA BEACH FL	F-I beitze	4.4 CITY-ST-ZIP			T observe	ja aasta.
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRE	SS			
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP			Change	
TITLE		T DETER	6 1 TITLE	1		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRE	:55			
CITY-ST-ZIP	by certify that the information supplied	with this filing does not awall	6.4 CITY-ST-ZIP	n stated i	n Section 119 07(3VI) Florida Statutos	I further cortify the	t the
, , , , , , , , , , , , , , , , , , , ,	OF COLUMN THE LIFE HITCH HEALTH SUPPRIOR	man and only wors follows:	・ャ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	, i sidicu i	n occion i ratoriokii, fiunua olalules	,, rounder dering that	a 10 16

. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l). 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 of an attachment with an address.