## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758651

(4)

JOHN'S PASS SEAFOOD FESTIVAL, INC.

98

FILED

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SECRETARY OF STATE
TALLAHASSEE. FLORIDA



DISTIT AVE W  UERA BCH FL 33708  Distinct Front Control of Every	Principal Place	e of Business	Mailing Address			##
MODRIA BCH FL 33708   MADERA BCH FL 33708   S. Certificate of Status Desired   Applied For Not Applied For N			· ·			
Principal Place of Business    Principal Place of Business	MADEIRA BCH F				· ·	
Principal Place of Business   2e Mailing Address   26   S. Certificate of Status Desired   \$.75 Additional Fee Regulated   \$. Certificate of Status Desired   \$.75 Additional Fee Regulated   \$. Suto, Apt. #, etc.   \$. Suto,	US		U\$			Applied For
Sulfo, Apt. #, etc.    28					59-2858359	Not Applicable
City & State  Ci	2. Principal Pl	lace of Business	— ·		5. Certificate of Status Desired	
City & State    Country   28   28   29   Country   28   29   29   Country   28   29   29   Country   28   29   29   Country   28   29   Country   28   29   Country   29   29   Country   29   29   29   29   Country   29   29   29   Country   29   29   29   29   Country   29   29   29   29   29   29   29   2	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$5.00 May Be
Zip	City & State					
Set	City & State	, `				
B. Name and Address of Current Registered Agent  MCDOLE, KATHLEEN H 150-128TH AVE W MADEIRA BCH FL 33708  B2 Street Address (P.O. Box Number is Not Acceptable)  B3	Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
MCDOLE, KATHLEEN H  150-128TH AVE W  MADEIRA BOH FL 33708  B2 Street Address (P.O. Box Number is Not Acceptable)  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 B4 City  FL B5 Zip Code  B4 City  FL B5 Zip Code  Charge gand. Lam familiar with, and accept the obligations of, Section 617 0503, Florida Statules. The appower agriculture of the provisions of charging lis registered agont, 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 agont, a familiar with, and accept the obligations of, Section 617 0503, Florida Statules.  IGNATURE  Signification of the provisions of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of special with a special content of the provision of the provision of special with a special content of the provision of the provision of special with a special content of the provision of the	24			30	_ 1	
MCDOLE, KATHLEEN H 150-123TH AVE W MADEIRA BCH FL 33708  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B4 City FL B5 Zip Code  B4 City FL B5 Zip Code  B5 Zip Code  B6 City FL B7 Zip Code  B7 City FL B7 Zip		9. Name and Address of Currer	it Registered Agent	B1 Nome	10. Name and Address of New Registered	Agent
150-128TH AVE W MADEIRA BCH FL 33708    Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submite this statement for the purpose of changing its registered agent, and accept the obligations of section 617 0503. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of section 617 0503. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered and the sequence of changing its registered and the sequence of changing its registered for the corporation's board of directors. I hereby accept the appointment as registered and the sequence of changing its registered for the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered for the corporation's board of directors. I hereby accept the appointment as registered hereby accept the population of the purpose of changing its registered hereby accept the populations of corporation's population and accept the population of the purpose of changing its registered hereby accept the population and accept the corporation's population and accept the population accept the population and accept the population accept the population accept the	140001 P	. 4/4-111 PPAL 11		of Name		
MADEIRA BCH FL 33708    63				82 Street Ad	ldress (P.O. Box Number is Not Acceptable)	
Ba   City   FL   B5   Zip Code				83	·	<u> </u>
II. Pursuant to the provisions of Soctions 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of chenging lits registered office or registered agont, 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. It am familiar with, and accept the obligations of, Section 617.6503, Florida Statutes.  IGNATURE  Signature. System of provided forms of registered agent and tien if applicable  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  IN IT III.  PD	MADEILA	001116 00700				
I. Pursuant to the provisions of Sections 617 (502) and 617.3508, Florida Statutes, the above named corporation submits this statement for the purpose of changing lits registere diffice or registered again. I am familiar with, and accopt the obligations of, Section 617 (503), Florida Statutes.  Ignature:  I				84 City	FI	85 Zip Code
Comparison   Com	11. Pursuant t	to the provisions of Sections 617.050	2 and 617.1508, Florida Statut	les, the above-named co	prporation submits this statement for the purpose of	of changing its registered
Comparison   Com	agent. Far	egistered agent, or both, in the State m <mark>famili</mark> ar with, and accept the oblig	of Florida, Such change was a ations of, Section 617.0503, Fl	authorized by the corpor orida Statutes.	ration's board or directors. I hereby accept the ap-	pointment as registered
Delete   D	SIGNATURE					
DELETE	12.					D DIDECTORS IN 40
ME NCDOLE, KATHLEEN H 180-128TH AVE W MADEIRA BCH FL  VPD DELETE 21 TITLE VPD DELETE 21 TITLE  WE MCABEE, RONALD 12901 VILLAGE BLVD MADEIRA BCH FL  LEE STD DELETE 31 TITLE  WE STD DELETE 31 TITLE  WE STD DELETE 31 TITLE  WE STD DELETE 31 TITLE  WADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP  LEE MADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP  LEE MADEIRA BCH FL  WE WE ALTH-LEE MADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP MADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP MADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP MADEIRA BCH FL  LOYD, JOANNE 32 NAME 706/12/98-01/01-003  ALCHY-ST-ZIP MADEIRA BCH FL  LOYD, JOANNE 33 STREET ADDRESS 75  ALCHY-ST-ZIP  LE DELETE 51 TITLE  DELETE 5	TITLE		<del></del>		ADDITIONS/CHANGES TO OFFICERS AN	
180-128TH AVE W   1.3 STREET ADDRESS   14 CITY-ST-ZIP   MADEIRA BCH FL	NAME		occur			Onlingo Addition
TY-ST-ZIP	STREET ADDRESS					
MCABEE, RONALD   12901 VILLAGE BLVD   23 STREET ADDRESS   17-ST-ZIP   MADEIRA BCH FL   24 CITY-ST-ZIP	CITY-ST-ZIP	MADEIRA BCH FL		1.4 CITY-ST-ZIP		
12901 VILLAGE BLVD   2.3 STREET ADDRESS   17-51-21P   MADEIRA BCH FL   2.4 CITY-51-21P   MADEIRA BCH FL   2.4 CITY-51-21P	TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME	NAME			2.2 NAME		
DELETE   STD	STREET ADDRESS			2.3 STREET ADDRESS		
MARE   LLOYD, JOANNE   32 NAME   33 STREET ADDRESS   33 STREET ADDRESS   34 CITY - ST - ZIP   MADEIRA BCH FL   DELETE   A1 TITLE   DELETE   DELET	CITY-ST-ZIP		T DESCE			Change   Addition
TY-ST-ZIP	TITLE		☐ DECEIE			
TY-ST-ZIP					7 22500007	527 <b>8</b>
DELETE					-95/12/30TT	11001003 ####150 75
4.2 NAME	TITLE		☐ DELETE		<u> </u>	Change Addition
### ### ##############################	NAM5			4. 2 NAME		
DELETE	STREET ADDRESS			4.3 STREET ADDRESS		
	CITY-ST-ZIP			4.4 CITY - ST - ZIP		
### ### ### ### ### ### #### #### ######	TITLE		☐ DELETE			Change Addition
TY-ST-ZIP         5.4 CITY-ST-ZIP           TLE         DELETE         6.1 TITLE         ☐ Change         ☐ Abdition           ME         62 NAME         ☐ Change         ☐ Abdition	NAME					
LE DELETE 6.1 TITLE Chambe Addition  ME 62 NAME	STREET ADDRESS					
ME 62 NAME	CITY-ST-ZIP TITLE		DELETE	<del></del>		Change A Aidition
	NAME		T percet			- SIN TO THE REAL PROPERTY OF THE PERTY OF T
	STREET ADDRESS					1 26
[Y-ST-ZIP   64 CITY-ST-ZIP   1	CITY-ST-ZIP					
. I bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3Vi). Florida Statutes, I further certify that the formation	14. Lhereby co	ertify that the information supplied w	ith this filing does not qualify fo	or the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further o	ertify 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 trusted 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 argentlachmont with an address.	officer or o	director of the corporation or the reco or Block 13 if changed, or on an atlai	eiver or trustee empowered to i chmont with an address	execute this report as re	equired by Chapter 617, Florida Statutes; and that	noer oath; that I am an my name appears in
GNATURE 12-313823		V.A	1/100001-	nn III	E-27 06 81=	2, 292872