FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

BAYVIEW COMMUNITY CEN. 20TH & LLOYD STREETS PENSCOLA FL 32503

(4)

Mailing Address C/O TERRY KELLEN

P.O. BOX 11313 PENSACOLA FL 32524-1313

PENSACOLA SPECIAL STEPPERS, INC.

2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
M		26			59-2145881	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
3		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	ÿ	8. This corporation has liability for intangible	
4	25	29	30		Florida Statutes Yes	
	9. Name and Address of Current	Registered Agent		······	10. Name and Address of New Registered A	igent
			81	Name		
CHERRY	y fran k		82	Street A	ddress (P.O. Box Number is Not Acceptable)	
257 MA	N-O-WAR CIRCLE					
CANTO	NMENT FL 32533		83			
•			84	City		85 Zip Code
			1	1	FL	1 1
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statut	es, the abov	e-named c	orporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	changing its registered
office of r	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a tions of, Section 617.0503. Flo	autnorized b orida Statute	y the corpo is.	oration's board of directors, I hereby accept the app	ontment as registered
SIGNATURE	Frank Cherry	Advisor		-	January 13	. 1997
SIGNATURE .	Signature, typed or printed name of registered agen		E Registered A	ent signature re	equired when reinstating) DATE	<u> </u>
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PD	DELETE	1.1 TITLE	i		Change Addition
NAME	CROWN, MARIE		1.2 NAME			
STREET ADDRESS	8 BESMA DRIVE		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32506		1.4 CITY-	ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE			Change
NAME	DUKE, LILLIAN		2.2 NAME			
STREET ADDRESS	3254 DONELY STREET		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	PENSACOLA FL 32506		2.4 CITY	ST-ZIP		
TITLE	SD	X DELETE	3.1 TITLE		SD	Change K Addition
NAME	ANSON, RUTH		3.2 NAME		McLin, Mary	
STREET ADDRESS	4080 KING ARTHUR DRIVE		3.3 STREE	T ADDRESS	942 Fairway Dr.	
CITY - ST - ZIP	PENSACOLA FL		3.4. CITY	ST-ZIP	Pensacola, FL 32507	
TITLE	AD	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	CHERRY, FRANK G		4. 2 NAM			
STREET ADDRESS	257 MAN O WAR		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	CANTONMENT FL 32533		4.4 CITY	ST-ZIP		
TITLE	FIT	☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME	Kellen, Terry		5.2 NAME			
STREET ADDRESS	3945 HIDDEN OAK DRIVE		5.3 STRE	T ADDRESS		Ì
CITY-ST-ZIP	PENSACOLA FL 32504		5.4 CITY	\$1-ZIP		
TITLE		☐ DELETE	6.1 TITLE	- · [Change Addition
NAME	1		6.2 NAME	1		
STREET ADDRESS			6.3 STRE	T ADDRESS		
CITY+ST-ZIP			6.4 CITY			
14. I do here	by certify that the information supplied	with this filing does not quali	fy for the ex	emption sta	ated in Section 119.07(3)(i), Florida Statutes. I further that my signature shall have the same legal effect as	certify that the
I am an c	officer or director of the corporation or	the receiver or trustee empoy	vered to exe	cute this re	port as required by Chapter 617, Florida Statutes; a	nd that my name
appears i	in Block 12 or Block 13 if changed, or	on an attachment with an ad-			, ,	904-
SIGNAT	TIPE: Setile	O RJ ARD	UIDE	lerry	Kellen, treas 1/13/97	477.590
JUNA	CONTRACTOR AND TYPED DE	POINTED NAME OF BIOMING OFFICE	OP DIRECTOR			The state of the s

FILED Feb 03 1997 8:00am Secretary of State

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3. Date incorporated or Qualified 10/02/1981

3a. Date of Last Report 01/26/1996