SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 12 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

FORT WALTON BEACH FL

CITY-ST-ZIP

EODT WAITON DEACH ADT MILECUM ACCOMISTION INC

roni v	VALION BEACH ANT MUSE	ON MOSOCIATION,	INO.				
Principal Place	e of Business	Mailing Address			T RODINA THREE BUILT BURGE HAD DAIGH A	HIT OCORF QUBIT QUALL BUNIL BUNIL BUNIL QUAL	
P.O. BOX 4081 P.O. BOX 4081 FT WALTON BEACH FL 32549 FT WALTON BE		P.O. BOX 4081 FT WALTON BEACH FL.	32549		DO NOT WRITE	IN THIS SPACE	
					3. Date Incorporated or Qualified 10/09/1981	3e. Date of Last Report 03/04/1996	
Principal Place of Business		2a, Mailing Address 26		4. FEI Number 59-2794061	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	30 Count	у	This corporation owes or has pare Personal Property Tax due June	30. Yes No	
	g. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	
CROWSON, UTAH C. 2845 JACK NICHOLAS WAY SHALIMAR FL 32579			8:	Street Acc	Zoie Campbell Address (P.O. Box Number is Not Acceptable) 221 Crewilla Drive Fort Walton Beach, F1 32548		
			8-			FL 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or purpose of changing its 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. Farmamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE	John Live typed or printed negleto of registered age	Zole Cam	pbe 11	ant signature re	pulsed when reinstation) July 25,	1997	
12.	OFFICERS ANI		13.	gon orginals or	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	VP ,	DELETE XX	1.1 TITLE		P.	Change	
NAME			1.2 NAME		Zoie Campbell	 	
STREET ADDRESS	412-A COBIA AVENUE		1.3 STREI	T ADDRESS	221 Crewilla Dr.	••	
CITY-ST-ZIP	FORT WALTON BEACH FL		1.4 CITY-	ST-ZIP	Fort Walton Beach,	F1 32548	
TITLE	\$	K K DELETE	2.1 TITLE		VP	Change Addition	
NAME	CERRATO, MARGARET		2.2 NAME		Jamie Sanders		
STREET ADDRESS	623 POWELL DRIVE		2.3 STREI	T ADDRESS	512 Nonth Ct	:	
CITY-ST-ZIP	FORT WALTON BEACH FL		2.4 CITY	-ST-ZIP	Ft. Walton Beach,	EJ 32548	
TITLE	D	DELETE.	3.1 TITLE		S 419 Bearing 10	Change	
NAME	CROWSON, UTAH		3.2 NAME		S 419 Bening D. Margaret Wyatt	Meitin V 3254	
STREET ADDRESS	221 PLEASANT ST NW		3.3 STREE	T ADDRESS	P. O. Box 427, Des		
CITY-ST-ZIP	FT WALTON BCH FL		3.4. CITY	-ST-ZIP	1: 0: DOX 427, DES	· 1	
TITLE	T	☐ DELETE	4.1 TITLE	İ	D	Change Addition	
NAME	BATES, DORIS A.		4. 2 NAM	E	JoAnn Field		
STREET ADDRESS	232 SHUMPERT STREET		4.3 STREI	T ADDRESS	192 SE Baggett P1		
CITY-ST-ZIP	FORT WALTON BEACH FL		4.4 CITY	ST-ZIP	Ft. Walton Beach,	F1 32548 Addition	
TITLE	D	DELETE	5.1 TITLE		,	Change Addition	
NAME	DINGUS, DOYLE		5.2 NAME			1	
STREET ADDRESS	810 NE CAMBORNE AVENUE		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	FORT WALTON BEACH FL		5.4 CITY	ST-ZIP			
TITLE	0	DELETE	6.1 TITLE			Change Addition	
NAME	MELVIN, JERRY		6.2 NAME			:	
STREET ADDRESS	840 SANTA ROSA BOULEVAR	iD	6.3 STREE	T ADDRESS			

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 17, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP 14. I do 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