SECONI AMOUNT DU	D NOTICE: CORPORATION WILL BE I IE ON OR BEFORE 09/15/99: \$61.25 (IF DISS	DISSOLVED ON OR AFTER SEP BOLVED, MINIMUM AMOUNT DUE TO	TEMBER 15, 1999. DREINSTATE: \$236.25).			
, COR	ONPROFIT RPORATION JAL REPORT	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State		SECRETARY OF STATE FILED SECRETARY OF STATE FILED		
	1999	DIVISION OF CO	ORPORATIONS	99 OCT 13 PH 4: 53		
DOCUI	MENT # 763295	33 001 13 PH 4: 53				
PARENT	rs without partners, w	EST JACKSONVILLE-O	RAN			
GE PAF	RK AREA CHAPTER NO. 587	', INC.				
Principal Place of Business Malling Address				-		
		P.O. BÓX 7443 JACKSONVILLE FL 32238-4	443			
	(Durling)					
2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualifed 05/14/1982		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number Applied For 23-7279289 Not Applicable		
City & State	e	City & State		5 Certificate of Status Desired \$8.75 Additional		
Zip Country		Zip Country		Fee Required		
24	25		0	Trust Fund Contribution Added to Fees		
	9- Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent		
BURDGE	OUDY E		82 Street Ad	BARA BARA GODGL Idress (P.D. Box Number js Not Acceptable)		
6283 B L	ONGHAMP DR YVHLLE FL 32244		83 87	54 PINE VAILEY LANE		
	CHOICE IT CELL			as Zip Code		
11. Pursuant t	to the provisions of Sections 617.0502	and 617,1508, Florida Statutes	the above-named co	ACK 50 A) J 16		
office or re agent, 1 as	egistered agent, or both, in the State of m familiar with, and accept the obligati	f Florida. Such change was aut ons of, Section 617,0503, Florid	horized by the corpora la Statutes.	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered agent	Halmal	legistered Agent signature requ			
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE NAME	BURDGE, JUDY É	E vereic	1.1 TITLE 1.2 NAME	BARBARA GOBBEL -		
STREET ADDRESS	6223 B LONGHAMP DR		1.3 STREET ADDRESS	8754 PING VALLEY LANG		
CITY-ST-ZIP TITLE	JACKSONVILLE FL 32244 VP	DELETE		JACKSONVILLE FC 52244		
NAME	FOLKES, LOUIS E		22 NAME	Brenda Banks yerror Laconsol 487 Cleveland Ave		
STREET ADDRESS CITY-ST-ZIP	4299 MELISSA COURT W JACKSONVILLE FL 32210		2.4 CITY-ST-ZIP	ORANGE PARK, FL JAOGS		
TITLE	TD	☐ DELETE	31 TITLE	Change (Addition		
NAME STREET ADDRESS	RHODES, ROBERT 9135 GLENPOWER CT		3.2 NAME 3.3 STREET ADDRESS	8000030189288 -10/19/9901088001		
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY-ST-ZIP	*****61.25 *****61.25		
TITLE	SD EGGART, CAROLYN N	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition		
NAME STREET ADDRESS	8634 STURBRIDGE CIR N		4.2 NAME 4.3 STREET ADDRESS	2 \		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP	16.14		
TITLE NAME	d Rigdon, Shirley	☐ DELETE	5.1 TITLE 5.2 NAME	Change Addition		
STREET ADDRESS	5123 BLACKBURN ROAD		5.3 STREET ADDRESS	4 '		
CITY-ST-ZIP TITLE	JACKSONVILLE FL VD	[VOELETE	6.1 TITLE VD	AO		
NAME	BAKER, DENÁ T	C PARTY	62 NAME	Mary E. Hughes Bohange Daddition 8546 OLD ORANGE PARK Rd		
STREET ADORESS	4341 DALRY DR. JAOKSONWILLE FL 32216		0.0 OTTALET ADDITEDO			
14. I hereby o	ertify that the information supplied with	this filing does not qualify for the	he exemption stated in	Orange Paak, FL 32073 Section 119 5/13(1), Florida Statutes. I further certify that the information		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.57[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 signifure shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, 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.						
	00 010.00	Eille Brou	1	9/23/49 904 264-454		
SIGNATURE: 1/1025/VE LLUCE H 1340/KBLD 9/23/99 904 264-15# Dayling Priore & Dayling Priore						