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 #

(5)

FILED						
Mar 24 1998 8:00am						
Secretary of State						

OKAL	OOSA REGIONAL BOOKMO	BILE IN TRANSIT, INC.			
Principal Place of Business Mailing Address				I HOBERT FORMER COLOR BANDA BANDA COME CARL BEGIN	I ANDRI BIDIN DIBIN BIĞIN ƏTBIN 1881
1000 S. PEAR CRESTVIEW FI	L ST., SOUTHSIDE BAPT, CHURCH L 32536	P. O. BOX 1427 Crestview Fl. 32536 US		Date Incorporated or Qualified 10/29/1982 Fel Number	Applied For
				59-2231474	Not Applicable
2. Principal Place of Business		2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, elc.	Sulte, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Stal	de .	City & State	, , , , , , , , , , , , , , , , , , , ,	7. Is this nonprofit corporation a homeowr	ners association?
Zip	Country 25	Zip	Country 30	This corporation owes or has paid the epersonal Property Tax due June 30.	
	9. Name and Address of Currer		30)	10. Name and Address of New Registers	
,			81 Name		
GEBAUER, MARGARET S			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
5946 BACKWARD RD. CRESTVIEW FL 32531			63		
Oncore	NEW PE 32331				
			84 City	F	85 Zip Code
11, Pursuant office or i agent. I a	to the provisions of Sections 617.050 registored agent, or both, in the State im familiar with, and accept the oblig Signalure, lypod or printed name of registered age		s, the above-named corp uthorized by the corporat rida Statutes. Registered Agent signature requir	coration submits this statement for the purpose tion's board of directors. I hereby accept the a	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	WILLIAM, RAYMOND		1.2 NAME		
STREET ADDRESS	****		1.3 STREET ADDRESS		i
CITY-ST-ZIP	CRESTVIEW FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	JOLLY, MAMIE SCHOOL AVENUE		2.2 NAME		
CITY-ST-ZIP	CRESTVIEW FL		2.3 STREET ADDRESS 2.4 City - St - Zip		
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GEBAUER, MARGARET S.		3.2 NAME		C overlåe C vangon
STREET ADDRESS	5946 BACKWARD RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	BAKER FL				
TITLE		☐ DELETE	4.1 TITLE D DY	restor	Change Addition
NAME			4.2 NAME	amuel A Alleh	
STREET ADDRESS			4.3 STREET ADDRESS 64	9 5 me chellond	<i>st</i>
CITY-ST-ZIP			4.4 CITY-ST-ZIP	restor amuel A. Alleh 19 5. me ciellond restulew. Fl.32	536
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition

6.4 CITY-ST-ZIP 14. I 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 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 on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

RAYMOND WILLIAMS

Change

Addition