

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766748 (8)

1. Corporation Name

PALM COAST/FLAGLER SPORTS AND CONSERVATION ASSOC
IATION, INC.



Principal Place of Business

Mailing Address

PO BOX 351221
PALM COAST FL 32135-1221
US

P.O. BOX 351221
PALM COAST FL 32135-1221
US

3. Date Incorporated or Qualified

01/26/1983

3a. Date of Last Report

03/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2795439

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FARMER, LINWOOD E
28 CARLSON LANE
PALM COAST FL 32137

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETE
NAME ROLSMAN, BARNEY
STREET ADDRESS 7 BANTON LANE, P.O. BOX 350429
CITY-ST-ZIP PALM COAST FL 32135-0429

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE P ☒ DELETE
NAME RICE, HARRY
STREET ADDRESS 782 VISCAYA BLVD.
CITY-ST-ZIP ST. AUGUSTINE FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME FARMER, LINWOOD E
2.3 STREET ADDRESS 28 CARLSON LANE
2.4 CITY-ST-ZIP PALM COAST, FL 32137

TITLE TD ☒ DELETE
NAME LINCOLN, JAMES D
STREET ADDRESS 63 WESTBROOK LN
CITY-ST-ZIP PALM COAST FL 32137

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME WILLIAM A. TOWNSEND
3.3 STREET ADDRESS 55 VILLAGE CIRCLE
3.4 CITY-ST-ZIP PALM COAST, FL 32164

TITLE V ☒ DELETE
NAME CLEMENTS, JOHN E.
STREET ADDRESS 726 FLAMINGO DR
CITY-ST-ZIP HOLLY HILL FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME WARREN H. BULLARD
4.3 STREET ADDRESS 162 WESTHAMPTON DR.
4.4 CITY-ST-ZIP PALM COAST, FL 32164

TITLE D ☐ DELETE
NAME MERRITT, JOHN P.
STREET ADDRESS 35 WESTBURY LN
CITY-ST-ZIP PALM COAST FL 32137

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME EDMONDS, CHARLES E
STREET ADDRESS 106 DUNES CIRCLE
CITY-ST-ZIP DAYTONA BEACH F

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Barney Rolman BARNEY ROLSMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/96
Date

(904) 446-1049
Daytime Phone #

CR2E037 (12/95)