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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770028

1. Corporation Name

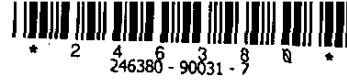
GEORGIA SEAGLE ALUMNI ASSOCIATION, INC.

Principal Place of Business

1002 W. UNIVERSITY AVE.
GAINESVILLE FL 32601

Mailing Address

3564 LAKEVIEW DR.
DELRAY BEACH FL 33445



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 P.O. Box 13287

Suite, Apt. #, etc.

27 City & State

28 GAINESVILLE, FL

Zip

Country

29 32604-6889 30 USA

3. Date Incorporated or Qualified

08/29/1983

4. FEI Number

59-2566810

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

9. Name and Address of Current Registered Agent

SESSUMS, T. TERRELL
SUITE 3200 NEDY BLVD
TAMPA FL 33601

10. Name and Address of New Registered Agent

81 Name

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

101 E. KENNEDY BOULEVARD

83 SUITE # 3200

84 City

FL

85 Zip Code

32602

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

TITLE D ☐ DELETE

NAME FOLEY, DAVID W
STREET ADDRESS 3723 E. COLONIAL DR.
CITY-ST-ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME DILWORTH, BRIG GEN R. L.
STREET ADDRESS 12400 NORTH LAKE PLACE
CITY-ST-ZIP RICHMOND VA

TITLE D ☐ DELETE

NAME GUTIERREZ, L
STREET ADDRESS 960 S. LAKESHORE BLVD.
CITY-ST-ZIP LAKE WALES FL

TITLE D ☐ DELETE

NAME BANKHEAD, W.B.
STREET ADDRESS 1706 BELMONTE AVE
CITY-ST-ZIP JACKSONVILLE FL

TITLE T ☐ DELETE

NAME MCCAREY, R W
STREET ADDRESS 201 S ORANGE AVE, SUITE 1501
CITY-ST-ZIP ORLANDO FL

TITLE P ☐ DELETE

NAME JONES, M. F
STREET ADDRESS 243 W. DEL MONTE AVENUE
CITY-ST-ZIP CLEWISTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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)(l), 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, with all other like empowered.

SIGNATURE:

George K. [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-99 561-498-5785
Date Daytime Phone #

246380-90031-7
770028

DOCUMENT # 770028 GEORGIA SEAGLE ALUMNI ASSOCIATION, INC. 1999
LINE 13: ADDITIONAL LIST OF OFFICERS AND DIRECTORS

TITLE	S
NAME	WALLACE, H. H.
STREET ADD.	1107 AMELIA STREET
CITY/ST/ZIP	ORLANDO, FL 32803
TITLE	D
NAME	MULDER, S. B.
STREET ADD.	109 SHELLEY DRIVE, SE
CITY/ST/ZIP	WINTER HAVEN, FL 33884
TITLE	D
NAME	SESSUMS, T. TERRELL
STREET ADD.	101 E. KENNEDY BOULEVARD, SUITE 3200
CITY/ST/ZIP	TAMPA, FL 332602
TITLE	D
NAME	ALSMeyer, W. L.
STREET ADD.	2985 BEGONIA WAY
CITY/ST/ZIP	COOPER CITY, FL 32026
TITLE	D
NAME	ASBURY, C.
STREET ADD.	2187 MONTGOMERY ROAD
CITY/ST/ZIP	MELBOURNE, FL 32935
TITLE	D
NAME	BECK, R. C.
STREET ADD.	25726 N. SR 121
CITY/ST/ZIP	ALACHUA, FL 32615
TITLE	D
NAME	BELL, W. E.
STREET ADD.	904 BARRIE AVENUE
CITY/ST/ZIP	TALLAHASSEE, FL 32303
TITLE	D
NAME	GANDY, J. D.
STREET ADD.	4918 ANDREA AVENUE
CITY/ST/ZIP	ANNANDALE, VA 22003

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TITLE	D
NAME	JERNIGAN, J. H.
STREET ADD.	1257 EDGEWATER POINT
CITY/ST/ZIP	SEBRING, FL 33870
TITLE	D
NAME	HYERS, J. E.
STREET ADD.	453 E. BROAD STREET
CITY/ST/ZIP	OZARK, AL 36360
TITLE	D
NAME	KALAPP, C. R.
STREET ADD.	727 MONTE CARLO ROAD.
CITY/ST/ZIP	JACKSONVILLE, FL 32216
TITLE	VP
NAME	HUGHES, J. H.
STREET ADD.	621 BOWERS LANE
CITY/ST/ZIP	ST. AUGUSTINE, FL 32084
TITLE	D
NAME	SESSUMS, S. W.
STREET ADD.	4806 BAYSHORE DRIVE
CITY/ST/ZIP	TAMPA, FL 33611
TITLE	D
NAME	NICHOLS, J.
STREET ADD	7117 CRANE AVENUE
CITY/ST/ZIP	JACKWONVILLE, FL 32216
TITLE	D
NAME	REITER, S. M.
STREET ADD	8544 IRON MILL COURT
CITY/ST/ZIP	JACKSONVILLE, FL 32244
TITLE	D
NAME	SCHNABEL, W.
STREET ADD	14 CRANSWICK LANE, NE
CITY/ST/ZIP	ROCHESTER, NY 14618

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TITLE D
NAME WATSON, JR., WM. J.
STREET ADD 2666 SW 14TH DRIVE
CITY/ST/ZIP GAINESVILLE, FL 32601

TITLE D
NAME SMITH, I. B.
STREET ADD ROUTE #2, BOX 417
CITY/ST/ZIP LAKE BUTLER, FL 32054

TITLE D
NAME STONE, R. L.

STREET ADD 4230 129TH STREET, WEST

CITY/ST/ZIP CORTEZ, FL 34215

TITLE D

NAME WADEL, J. M.

STREET ADD 3030 HENLEY ROAD

CITY/ST/ZIP GREEN COVE SPRINGS, FL 32043

TITLE D

NAME WHITE, J. B.

STREET ADD 405 RIVERHILL DRIVE

CITY/ST/ZIP ATLANTA, GA 30328

TITLE VP-OPERATIONS

NAME ANDERSON, G. R.

STREET ADD 3564 LAKEVIEW DRIVE

CITY/ST/ZIP DELRAY BEACH, FL 33445