

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 770082 (6)
 1. Corporation Name
SUNSHINE CHAPTER, NATIONAL SAFETY COUNCIL, INC.



Principal Place of Business 150 NO BEACH STR DAYTONA BCH FL 32114 US	Mailing Address 150 NO BEACH STR DAYTONA BCH FL 32114 US
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3. Date Incorporated or Qualified
09/01/1983

4. FEI Number
59-2372470

Applied For	Not Applicable
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2. Principal Place of Business
 21. Suite, Apt. #, etc.

2a. Mailing Address
 26. Suite, Apt. #, etc.

22. City & State
 27. City & State

23. Zip
 24. Country
 28. Zip
 29. Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
**MOUNTCASTLE, ARTHUR
 150 N. BEACH STREET
 DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVC <input type="checkbox"/> DELETE	1.1 TITLE	DVC <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LOUTHIAN, GIL	1.2 NAME	Benett, Russell
STREET ADDRESS	121 SW PORT ST LUCIE BLVD	1.3 STREET ADDRESS	880 Old Mill Run
CITY-ST-ZIP	PORT ST LUCIE FL	1.4 CITY-ST-ZIP	Ormond Beach, Fl 32174
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VON NIEDA, HAROLD	2.2 NAME	Greene, Barbara
STREET ADDRESS	100 S. RIDGEWOOD AVE.	2.3 STREET ADDRESS	4041 S Nova Road
CITY-ST-ZIP	EDGEWATER FL	2.4 CITY-ST-ZIP	Port Orange, Fl 32127
TITLE	DT <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CRISP, LINDA	3.2 NAME	McIntire, James
STREET ADDRESS	P.O. BOX 10809 N/A	3.3 STREET ADDRESS	8 Riverine Drive
CITY-ST-ZIP	DAYTONA BEACH FL	3.4 CITY-ST-ZIP	Palm Coast, Fl 32164
TITLE	DC <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, DAVID	4.2 NAME	
STREET ADDRESS	444 SEABREEZE BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRIESE, JUDGE S	5.2 NAME	
STREET ADDRESS	251 N RIDGEWOOD AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	5.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOUNTCASTLE, ARTHUR, M.	6.2 NAME	
STREET ADDRESS	1341 GOLFVIEW DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	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.

SIGNATURE: *Arthur M Mountcastle* **Arthur M Mountcastle, CEO 3/2/98**

CR2E037 (10/97)