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 # 771025

(4)

1. Corporation Name										
BIG BEND RIGHT TO LIFE, INC.										
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Principal Place of Business Mailing Address									T 1944L 1951 1964 HEN SOME UND BIT BIR DEN BIR BIR BIR BIR BIR HEN HEN BIR	
117 1/2 S. MONROE ST. 117 1/2 S. MONROE ST.									3. Date Incorporated or Qualified	
PO BOX 12968 PO BOX 12968										11/01/1983
TALLAHASSEE FL 32317 TALLAHASSEE FL 32317									4. FEI Number Applied For	
										59-25 19385 Not Applicable
2. Principal Place of Business 2a. Mailing Address										Certificate of Status Desired \$8.75 Additional
21				26						Fee Required
Suite, Apt.	#, etc.			Suite, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be
22				27						Trust Fund Contribution
City & Stat	e			City & State						7. Is this nonprofit corporation a homeowners association?
Zip					4			Country		8. This corporation owes or has paid the current year Intangible
24			25]					Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agen										10. Name and Address of New Registered Agent
								1	Name	
	I, CAROLE					82 Street Addre		Street Addre	ss (P.O. Box Number Is Not Acceptable)	
	S. MONRO									
TALLAHASSEE FL 32301							83	i		
							84	1	City	geog 85 Zip Code
44 December 45 and John of Continue All Organisms										FL V
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's lagent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									on'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 it										d when reinstating) DATE
12.	organica o, typoc	- D	OFFICERS AND					-	angression response	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD				☐ DELETE			1.1 TITLE		Change Addition
NAME					1			1.2 NAME		
STREET ADDRESS			RNEY WAY	1.3			1.3 STREET ADDRESS		DORESS	
CITY-ST-ZIP	TALLAH	iass	EE FL					ST-	ZIP	
TITLE	VO			☐ DELETE			2.1 TITLE			Change Addition
NAME	BOWLING, BILL							2.2 NAME		
STREET ADDRESS	TALLAUADOFF FL								DORESS	
CITY-ST-ZIP									-ZIP	
TITLE	D BOTTCHED DOCEMARY O				☐ DELETE	F	3.1 TITLE			Change Addition
NAME	DY A DAY AG					1	3.2 NAME			
	MANUTACHIA CI							3.3 STREET ADORESS		
CITY-ST-ZIP TITLE	monitored it				DELETE	_	3.4. CITY-ST-ZIP		- ZIP	Change Addition
	NAME							4. 2 NAME		
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CITY-ST-ZIP										'
TITLE							4.4 CITY - ST - ZIP 5.1 TITLE		=::	Change Addition
NAME						5.2 NA			İ	
STREET ADDRESS						5.3 STREET			DDRESS	
CITY-ST-ZIP						5.4 CITY-S			1	
TITLE					☐ DELETE					Change Addition
NAME						Ð	6.2 NAME			
STREET ADDRESS				6.3 STREET AL			ODRESS			

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

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FILED

Apr 16 1998 8:00am

Secretary of State