NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003496

1. Corporation Name

SETAC FOUNDATION FOR ENVIRONMENTAL EDUCATION, IN C.

Principal Place of Business

1010 NORTH 12TH AVE. PENSACOLA FL 32501 Mailing Address

1010 NORTH 12TH AVE. PENSAÇOLA FL 32501

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90020 015 ****70.00



2. Principal	Place of Business	2a. Mailing Ad	2a. Mailing Address				3. Date Incorporated or Qualif	ed			
21	ı]		26				07/05/1994				
Suite, Ap	t. #, etc.	Suite, Apt.	#, etc.			4	FEI Number		Ĺ	App	lied For
22		27					52-1704017			Not	Applicable
City & Sta	ate	├──ŋ ´	City & State			5	5. Certifcate of Status Desired	. ∑	\$8.75 Additional Fee Required		
Zip	Country	Zip		Country	 	6	5. Election Campaign Financir	na	\$5	.00	May Be
24	25 29					- 1	Trust Fund Contribution Added to				,
	9. Name and Address of Cu	rrent Registered Ager	it			10	0. Name and Address of Ne	w Registered	Agent		
				81	Name						
PARRISH, RODNEY					Street	Addroop	(D.O. Roy Number is Not Asse	ntoblo)			
1010 NORTH 12TH AVE.					82 Street Address (P.O. Box Number is Not Acceptable)						
PENSACOLA FL 32501					83						
I EHONG	00112 02001								1		
				84	City			FL	85	Zip C	ode
office or	t to the provisions of Sections 617 registered agent, or both, in the S	itate of Florida. Such ch	ange was author	ized by	the corpo	corporation's l	on submits this statement for t board of directors. I hereby ac	the purpose of	changi ntment	ng its r as reg	egistered istered
·	am familiar with, and accept the o	Digations or, Section 61	r.opos, Florida (ətatü185.	•						
SIGNATURE	Signature, typed or printed name of registere	d agent and title if applicable.	(NOTE: Regis	tered Agen	t signature n	equired wher	n reinstating)	DATE			
12.	OFFICER:	S AND DIRECTORS	1	13.			ADDITIONS/CHANGES TO	OFFICERS AN	D DIR	CTOF	RS IN 12
TITLE	P		DELETE	I.1 TITLE	- 1				☐ Ch	ange	☐ Addition
NAME	MEHRLE, PAUL			1.2 NAME	Ì						
STREET ADDRES	s BOX 708 N/A			.3 STREET	ADDRESS						
CITY-ST-ZIP	GREENFIELD IN		1	1.4 CITY- \$1	r-ZIP						
TITLE	ST		DELETE 2	2.1 TITLE					Ch	ange	☐ Addition
NAME	BENSON, WILLIAM		1:	2.2 NAME	Ì		•		•		
STREET ADDRES	s University of Mississip	PI		3 STREET	ADDRESS						
CITY-ST-ZIP	UNIVERSITY MS 19380			2. 4 CITY-S	T-7IP						
TITLE	D			3.1 TITLE			· · · · · · · · · · · · · · · · · · ·		Ch	ange	Addition
NAME	KENAGA, EUGENE DR.			3.2 NAME	- 1					-	
STREET ADDRES	JEGA EACT DIVE BUIED DE)AD			ADDRESS						
CITY-ST-ZIP	MIDLAND MI 48640	·· ·-		3.4. CITY-S	- 1		•				
TITLE	D	Г1		1.1 TITLE	1- <u>2</u> 1			·	☐ Ch	 ange	Addition
NAME	PARRISH, RODNEY			, 2 NAME					_	v	
STREET ADDRESS	4040 NODTH 40TH AVE			.3 STREET	ADDDEEC						
	PENSACOLA FL 32501										
CITY-ST-ZIP TITLE	PP PP			4 CITY-ST	1-211				☐ Ch	ange	☐ Addition
	BISHOP, WILLIAM			5.2 NAME							
NAME STREET ADORES	LINE COORDY OF LEGOLOGIC	PI N/A			ADORESS						
STREET ADDRES	UNIVERSITY MI	11 14/7	L'	5.4 CITY-S1							
CITY-ST-ZIP	A CHARLOILI MI			3.1 TITLE	- 287				☐ Ch		☐ Addition
TITLE	CIECY IOUN D	u	D	2 NAME						arry G	CT CONTROL
NAME	GIESY, JOHN P	SITY AVA	•		ADDDCCC						
STREET ADORES	1	NIT N/A		3.3 STREET							
CITY-ST-ZIP	EAST LANSING MI		. 6	3.4 CITY-\$1	r-z)P						'

14. I hereby certify that the information supplied with this fling 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 peport is true and occurate 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 bustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 in pranged for on an attachment with an address, with all other like empowered.

SIGNATURE

(MRCHATOURY) STAURIONEY) Parr

12/eb 39

850-469-9777

Daytime Phone #

CR2E037 (11/98