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Jul 02 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N18018 (4)

1. Corporation Name

SAVE THE FLORIDA PANTHER, INC.



Principal Place of Business

Mailing Address

2119 1ST STREET SOUTH  
ST. PETERSBURG FL 33705

2119 1ST STREET SOUTH  
ST. PETERSBURG FL 33705-2824

3. Date Incorporated or Qualified  
12/01/1986

3a. Date of Last Report  
10/30/1996

2. Principal Place of Business

2a. Mailing Address

21 1224 14th Avenue N.

26 P.O. Box 232

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ST. PETERSBURG FL

28 St. Petersburg FL

Zip

Country

Zip

Country

24 33705

25

29 33754

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREEN, PAMELA J  
2119 1ST STREET SOUTH  
ST PETERSBURG FL 33705

81 Name

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

447 3rd Ave. No.

83 Suite 203

84 City St Petersburg

FL

85 Zip Code 33701

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

Pam Green

4/26/97

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME GALLAGHER, PETER B  
STREET ADDRESS 1224 14TH AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL 33705

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

TITLE TD  
NAME MCDONALD, DAN  
STREET ADDRESS 285 PELICAN DR  
CITY-ST-ZIP MELBOURNE FL 32951

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D  
NAME COOK, CHARLES  
STREET ADDRESS 422 O'LINDA COURT  
CITY-ST-ZIP LAKELAND FL 33805

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

14. I do 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 [Signature] 4/26/97 1224 14th Ave N St Petersburg FL 33705

CR2E037 (9/96)