FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 12 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998

STREET ADDRESS

DOCUMENT # N19511

(7)

THE JEWETT ALUMNI ASSOCIATION, INC.

THE JEWETT ALUMNI ASSOCIATION, INC.					
Principal Place of Business		Mailing Address		- 1 SARITINI ARI TITUN ARITAN ARITAN SITAN SITAN ARITAN ARITAN ARITAN ARITAN ARITAN ARITAN ARITAN ARITAN ARITAN	II BEWIN WINDI WIWIL WINAL FUNT
2447 MARY JEWETT CIRCLE WINTER HAVEN FL 33881-1725 US		2447 MARY JEWETT CIRCLE WINTER HAVEN FL 33881-1725 US		3. Date Incorporated or Qualified 02/27/1987 4. FEI Number	Applied For
		.		59-2762782	Not Applicable
Principal Place of Business 1		2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	€	City & State		7. Is this nonprofit corporation a homeowner	s association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25		10		Yes 🛂 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
			81 Name		
FLOYD, DONZELL			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	·
2447 MARY JEWETT CIRCLE					
WINTER HAVEN FL 33881			83		
			84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 617,0502	and 617,1508. Florida Statutes	the above-named core	poretion submits this statement for the purpose of	changing its registered
office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was au ions of, Section 617.0503, Flori	thorized by the corporat da Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	ointment as registered
SIGNATURE .					
12.	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agent eignature requirement 13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/OFFARGES TO OFFIGERS AND	Change Addition
NAME	BROWN, EDITHE W.		1.2 NAME		
STREET ADDRESS	1281 "38TH" ST NW		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		1.4 City-St-ZiP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CLARK, GUSSIE H.		2.2 NAME		
STREET ADDRESS	2255 FIRST STREET NORTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	TYLER, JOANN O.		3.2 NAME		The second second
STREET ADDRESS	2300 S. SWAN COURT, N.E.		3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		3.4. CITY-ST-ZIP		
TITLE	C	☐ DELETE	4.1 TOTLE		☐ Change ☐ Addition
NAME	FLOYD, DONZELL		4. 2 NAME		
STREET ADDRESS	2447 MARY JEWETT CIRCLE		4.3 STREET ADDRESS		
CITY-SI-ZIP	WINTER HAVEN FL		4.4 CITY-ST-ZIP		
TITLE	AAAAA MAA AAAAA AA AAAAA AAAAAAAAAAAAA	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
City-St-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		

14. Thereby 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:

DOWNZELIFIOYA) 2/7/98 (941293-6548)

6.3 STREET ADDRESS