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Jun 22 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N20484 (4)**  
1. Corporation Name

**WASHINGTON-HOLMES VOCATIONAL TECHNICAL CENTER FOUNDATION, INC.**

Principal Place of Business	Mailing Address
757 Hoyt St. Chipley, FL 32428	757 Hoyt St. Chipley, FL 32428-1436

3. Date Incorporated or Qualified

05/05/1987

4. FEI Number

59-2810664

Applied For

Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 757 Hoyt St.	26 757 Hoyt St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Chipley FL	28 Chipley FL
Zip	Zip
24 32428	29 32428
Country	Country
25	30 USA

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

10. Name and Address of New Registered Agent

Holley, Gerald  
102 E. Church Avenue  
Chipley, FL 32428

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

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

(NOTE: Registered Agent's signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	Gunter, William H. S
STREET ADDRESS	Rt 5 Box 870 (N/A)
CITY-ST-ZIP	Chipley, FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	Norris, Raymond
STREET ADDRESS	213 Bell Road
CITY-ST-ZIP	Chipley, FL
TITLE	D <input type="checkbox"/> DELETE
NAME	Ray, Ralph W.
STREET ADDRESS	813 Third Street
CITY-ST-ZIP	Chipley, FL 32428
TITLE	D <input type="checkbox"/> DELETE
NAME	Uptagrafft, Cathy
STREET ADDRESS	1919 Hwy 71
CITY-ST-ZIP	Marianna, FL 32448
TITLE	D/T <input type="checkbox"/> DELETE
NAME	Register, Stephen B. Jr.
STREET ADDRESS	1552 Brickyard Rd.
CITY-ST-ZIP	Chipley, FL 32428
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Harris, Howard
1.3 STREET ADDRESS	Rt 1 (N/A)
1.4 CITY-ST-ZIP	Caryville, FL 32427
2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Valencia, Luis
2.3 STREET ADDRESS	1334 Railroad Avenue
2.4 CITY-ST-ZIP	Chipley, FL 32428
3.1 TITLE	D/P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Daugherty, John III
3.3 STREET ADDRESS	P.O. Box 663 (N/A)
3.4 CITY-ST-ZIP	Chipley, FL 32428
4.1 TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Miller, Richard
4.3 STREET ADDRESS	1396 Jackson Avenue
4.4 CITY-ST-ZIP	Chipley, FL 32428
5.1 TITLE	D/S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Saunders, Wayne
5.3 STREET ADDRESS	847 Candy Lane
5.4 CITY-ST-ZIP	Chipley, FL 32428
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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:

Stephen B. Register, Jr. 5/22/98 (850)638-4251

CR2E037 (10/97)