FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

N24555

(7)

VOLUSIA-FLAGLER ENVIRONMENTAL ACTION COMMITTEE,

INC.									
Principal Place of Business Mailing Address									
724 S. BEACH ST. P.O. BOX 590 DAYTONA BEACH FL 32115 724 S. BEACH ST. P.O. BOX 590 DAYTONA BEACH FL 32115 DAYTONA BEACH FL						Date Incorporated or Qualified	2a Doto o	Last Report	
						01/28/1988		15/1995	
	lace of Business	2a. Mailing Address			4. FET Number	\ <u></u>	Applied For		
Suite, Apt.	# etc	Suite, Apt. #, etc.				NOT APPLICABLE		Not Applicable	
22	<i>n</i> , 0.0.	27				5. Certif-cate of Status Desired	□ \$	8.75 Additional Fee Required	
City & State		<u>⊢</u> ¬ ′	City & State		6. Election Campaign Financing		55.00 May Be		
7in	Zip Country					Trust Fund Contribution		Added to Fees	
24	25			Country		8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes Yes No			
	t	10. Name and Address				ıt			
				81	Name		- 		
	S, REID B.		-	82	Street Addi	ess (P.O. Box Number is Not Acceptable	D)		
724 S. E P.O. BO	BEACH STREET			83		·			
	A BEACH FL 32115								
DATE OF	in beholf te de 110			84	City		FI 85	Zip Code	
Or register	to the provisions of Sections 617.05 ed agent, or both, in the State of Fi th, and accept the obligations of, S	onda. Such change wa	s authorized by the c	/e-n	named corpor oration's boar	ation submits this statement for the purp of directors. I hereby accept the appoi	ose of changing ntment as regis	g its registered office tered agent. I am	
SIGNATURE									
Signature, typed or printed name of registered agent and title 1 applicable (NOTE 1 12. OFFICERS AND DIRECTORS				logistered Ager I signature rejuine. 13.		twen renstating: ADDPTONS/CHANGESTO OF FIG	DATE SELECT AND ENDER	CTOPS IN 12	
TITLE	PD DELETE			L F.		ACTA TONG CARAGES TO CATE	Cha		
NAME	BIDGOOD, LEE		1.2 NAI	ME				· L	
STREET ADDRESS	310 QUAY ASSISI		1.3 STH	EE I	ADDRESS				
CITY-ST-ZIP TITLE	NEW SMYRNA BEACH FL VD			14 CITY+ST ZIP			F-7.0		
NAME	NEWTON, BRYNN			2 1 TITLE 2 2 NAME			Cha	inge Addition	
STREET ADDRESS	112 ORANGE AVENUE		4	TREET ADDRESS					
CITY-SI-ZIP	DAYTONA BEACH FL			2 4 CrTY-ST-ZiP					
TITLE	TD DELETE		LETE 3 1 TITI	3 1 TITLE			☐ Cha	nge 🔲 Addition	
NAME	SAMLER, BARBARA R.		3 2 NAM						
STREET ADDRESS CITY-ST-ZIP	2033 PENNCREST COURT DELAND FL		T T		ADDRESS				
TITLE	D			34 CITY+ST-ZIP 41 TITLE			ПСча	nge Addition	
NAME	HUGHES, REID B.			ME	i		L.1 v .v		
STREET ADDRESS	724 S. BEACH STREET		4 3 STR	EET A	ADDRESS				
CITY-ST-ZIP	DAYTONA BEACH FL		4.4 CrT1		I-ZiP				
TITLE	_			5 1 TITLE			Cha	nge 🔲 Addition	
NAME STREET ADDRESS	HAVILAND, ROBERT P. 1035 GREEN ACRES CIRCL	F		5.2 NAME 5.3 STREET ADORESS					
CITY-ST-ZIP	DAYTONA BEACKER			5 4 CITY-ST-ZIP					
TITLE		DE					Cha	nge 🔲 Addition	
NAME			6.2 NAN	4E	ł		_	_	
STREET ADDRESS			63 STH	EET #	ADDRESS				
CITY-ST-ZIP 14. I do hereby	/ certify that the information supplie	d with this filing is volve	64 0/TY	-SI	not analis for	r the exemption stated in Section 119.07	Manta Produce		
certify that	the information indicated on this ar	ional report or supplied	corry torrished and di	JUS	not quality to	a and that purpled stated in Section 119.07	ری)(k), r loriga S	rarutes. I further	

ceruly that I am an officer or director of the corporation or typolenientar annual report is to oath; that I am an officer or director of the corporation or the receiver or trustee empowered appears in Block 12 or Block 13 it hanged, or op an attachment with any idress.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME & SIGNING OFFICER OR DIRECTOR supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name

Teb 20, 1896 (904) 423-4682