

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N25784** (2)

1. Corporation Name

SUWANNEE RIVER RESOURCE CONSERVATION AND DEVELOPMENT COUNCIL, INC.



Principal Place of Business 304 S. AVE 304 S. AVENUE LIVE OAK FL 32060	Mailing Address 304 S. AVE 304 S. AVENUE LIVE OAK FL 32060
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3. Date Incorporated or Qualified

04/01/1988

4. FEI Number

59-2510229

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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

**JOHNSON, VERNEIL
304 S OHIO AVENUE
LIVE OAK FL 32060**

81 Name

Russell Pope

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

304 S. Ohio Ave.

83

84 City

Live Oak

FL

85 Zip Code

32060

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	JOHNSON, VERNEIL	
STREET ADDRESS	RT 5 BOX 187 N/A	
CITY - ST - ZIP	LIVE OAK FL	

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	POPE, Russell	
1.3 STREET ADDRESS	P.O. Box 7 N/A	
1.4 CITY - ST - ZIP	Live Oak FL 32060	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	OGDEN, RUFUS	
STREET ADDRESS	RT. BOX 422	
CITY - ST - ZIP	LALE CITY FL	

2.1 TITLE	VPO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Russell, Bryant	
2.3 STREET ADDRESS	Rt 3 Box 205	
2.4 CITY - ST - ZIP	Perry FL 32347	

TITLE	VPO	<input checked="" type="checkbox"/> DELETE
NAME	SCOTT, ELLIOTT	
STREET ADDRESS	P O BOX 6104 N/A	
CITY - ST - ZIP	LIVE OAK FL	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		

TITLE	TD	<input type="checkbox"/> DELETE
NAME	DEAS, JON	
STREET ADDRESS	RT. 1 BOX 137	
CITY - ST - ZIP	JENNINGS FL	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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:

[Signature] 1-29-98 (904)-364-4278

CR2E037 (10/97)