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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N29336

1. Corporation Name

THE OKALOOSA-WALTON COMMUNITY COLLEGE FOUNDATION, INC.

Principal Place of Business

100 COLLEGE BLVD.
NICEVILLE FL 32578

Mailing Address

100 COLLEGE BLVD.
NICEVILLE FL 32578



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

11/14/1988

4. FEI Number

59-2865698

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

RICHBURG, DR. JAMES R.
100 COLLEGE BLVD.
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

81 Name

James P. Chitwood

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

100 College Boulevard

83

84 City

Niceville

FL

85 Zip Code
32578

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

James P. Chitwood

James P. Chitwood

1/7/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	RICHBURG, JAMES R MD	
STREET ADDRESS	223 YACHT CLUB DR	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	D	☐ DELETE
NAME	SMITH, J E	
STREET ADDRESS	700 W BALDWIN AVE	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	
TITLE	D	☐ DELETE
NAME	BARKER, GENE	
STREET ADDRESS	45 NE BEAL PKWY	
CITY-ST-ZIP	FT WALTON BEACH FL 32548	
TITLE	D	☒ DELETE
NAME	CARR, FREDDY G	
STREET ADDRESS	10 DANBURY CT	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	D	☐ DELETE
NAME	TINSLEY, HERB	
STREET ADDRESS	198 NE EGLIN PKWY	
CITY-ST-ZIP	FT WALTON BEACH FL 32548	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	Richburg, James R.	
1.3 STREET ADDRESS	223 Yacht Club Drive	
1.4 CITY-ST-ZIP	Niceville, FL 32578	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Eddie Mae Owens	
4.3 STREET ADDRESS	228 Mooney Road	
4.4 CITY-ST-ZIP	Fort Walton Beach, FL 32547	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

James R. Richburg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Richburg

1/7/99 (850) 729-5357

Date

Daytime Phone #

CR2E037 (1/98)