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FILED

Mar 11 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Morand
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N33061 (5)

1. Corporation Name

FRIENDS OF THE SEBASTIAN RIVER, INC.

Principal Place of Business

11155 ROSELAND ROAD
SUITE 1
SEBASTIAN FL 32958

Mailing Address

P.O. BOX 284
ROSELAND FL 32957-02843. Date Incorporated or Qualified
06/30/19893a. Date of Last Report
07/30/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
65-0187881Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVANS, JOHN
11155 ROSELAND ROAD
ROSELAND FL 32957

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GLOVER, TIM
STREET ADDRESS 9660-3 ESTUARY WAY
CITY - ST - ZIP SEBASTIAN FL 329581.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE VD
NAME CORUM, CAROLYN
STREET ADDRESS 881 DOLORES ST
CITY - ST - ZIP SEBASTIAN FL 329582.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE SD
NAME BOWMAN, MARGARET
STREET ADDRESS P.O. BOX 783 N/A
CITY - ST - ZIP WALASSO FL 329703.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE TD
NAME SHIPLEY, SHERRY
STREET ADDRESS 8080 142ND ST
CITY - ST - ZIP SEBASTIAN FL4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

Sherry Shipley, Secretary

3/7/97 561-588-4779

Date

Daytime Phone # 0021118

CR2E037 (9/96)