NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # N33681**

1. Corporation Name

## HALIFAX DISTRICT OF THE FLORIDA ENVIRONMENTAL HE ALTH ASSOCIATION, INC.

Principal Place of Business 1360 S WOODLAND BLVD DELAND FL 32720-7731 Mailing Address

1360 \$ WOODLAND BLVD. DELAND FL 32720-7731

## FILED Feb 22, 1999 8:00 am Secretary of State

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2. Principal P	lace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed 08/09/1989	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number 59-2963085	Applied For Not Applicable
City & Stat	e	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip 24	Country 25	Zip 30	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
MCRAE, J. 1360 S W DELAND F	OODLAND BLVD.		81 Name ( 82 Street A 83 13 ( 84 City)	Williams, Jenniter ddress (P.O. Box Number is Not Acceptable)  O S. Woodland Bl	V d
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 pbligations of Section 617.0503, Florida Statutes.  SIGNATURE  Signally I, typed or printed tame of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GATELY, MICHAEL		1.2 NAME		1
STREET ADDRESS	1250 INDIAN LAKE RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32124		1.4 CITY-ST-ZIP		
TITLE	VD	DELETE	2.1 TITLE	YD: _	☐ Change
NAME	EILLIAMS, EDWARD	. /		Ron Freeman	/ `
STREET ADDRESS	501 S CLYDE MORRIS		2.3 STREET ADDRESS	427 Glann Abbus Lane	
CITY-ST-ZIP	DAYTONA BEACH FL		2.4 CITY-ST-ZIP	eon Freeman 427 Glenn Abbul Lane Ochany 1 FL 3271	ا سا
TITLE	D	☐ DELETE	3.1 TITLE		Change   Addition
NAME	WILLIAMS, JENNIFER	:	3.2 NAME	wilhams, finnitre	· '
STREET ADDRESS	4000 0 11/0 0 DI 41/0 DI 1/0		3.3 STREET ADDRESS	360 5 Woodland Blvd	-·· '
CITY-ST-ZIP	DELAND FL		3.4. CITY-ST-ZIP	Duand FU 32720	
TITLE	D	☐ DELETE	4.1 TITLE	P	Change
NAME	ROBINSON, MELINDA		4. 2 NAME	Robinson, Milinda o	
STREET ADDRESS	2752 ENTERPRISE RD		4.3 STREET ADDRESS	762 Enterong Rd	
CITY-ST-ZIP	ORANGE CITY FL 32763		4.4 CITY-ST-ZIP	Dranks City Fly 32	71,3
TITLE	TD	<b>₽</b> €LETE	5.1 TITLE		7 ( 3 Addition
NAME	MCRAE, JAMES	<b>-</b>		3coff Chambers pl	
STREET ADDRESS	1360 S WOODLAND BLVD		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELAND FL		5.4 CITY-ST-ZIP	Orange City, El 3276	,3
TITLE	PER NIN I C	☐ DELETE	6.1 TITLE	may my It C STIE	☐ Change ☐ Addition
Į.			6.2 NAME	•	Clausings Clausing)
NAME			6.3 STREET ADDRESS		
STREET ADDRESS			0.5 STREET ALAJKESS		

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:

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904)822-6246

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