

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N36640** (3)
1. Corporation Name
APALACHICOLA BAY OYSTER FARMERS ASSOCIATION, INC



Principal Place of Business Mailing Address
**91 AVENUE C
P. O. BOX 144
APALACHICOLA FL 32320
US**
**PO BOX 144
P. O. BOX 144
APALACHICOLA FL 32320
US**

3. Date Incorporated or Qualified **02/15/1990** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-3015616** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be
Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country
25 Country 30 Country

9. Name and Address of Current Registered Agent

**JONES, DAVID
91 AVENUE C
APALACHICOLA FL 32320**

10. Name and Address of New Registered Agent

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	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, DAVID	1.2 NAME	
STREET ADDRESS	91 AVENUE C.	1.3 STREET ADDRESS	
CITY-ST-ZIP	APALACHICOLA FL	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINFIELD, JOHN	2.2 NAME	
STREET ADDRESS	P.O. BOX 946 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	EASTPOINT FL	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SQUARE, HELENE	3.2 NAME	
STREET ADDRESS	BOX 62 - ST. GEORGE ISLD N/A	3.3 STREET ADDRESS	
CITY-ST-ZIP	EASTPOINT FL	3.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAPEL, GEORGE	4.2 NAME	
STREET ADDRESS	163 AVENUE B	4.3 STREET ADDRESS	
CITY-ST-ZIP	APALACHICOLA FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOODWORTH, MINOR	5.2 NAME	
STREET ADDRESS	P.O. BOX 733 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	EASTPOINT FL	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCARABIN, RICHARD	6.2 NAME	
STREET ADDRESS	120 - 22ND AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	APALACHICOLA FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *George L. Chapel*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GEORGE L. CHAPEL - President

July 24, 1996 (904) 653-9524
Date Daytime Phone #

CR2E037 (12/95)