

# 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 # N37268 (2)

1. Corporation Name

SEBASTIAN INLET EAGLES LADIES AUXILIARY 4067, IN C.



Principal Place of Business

Mailing Address

11630-U81  
SEBASTIAN FL 32958  
US

11630-U81  
SEBASTIAN FL 32958  
US

3. Date Incorporated or Qualified

03/20/1990

3a. Date of Last Report

02/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2911237

Applied For

Not Applicable

22

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

24

8. 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

~~RUSSELL KATHY~~ SAMANTHA KOWALSKI  
8818-102ND PL 681 Biscayne Ln.  
VERO BEACH FL 32968 Sebastian, FL 32958

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

*Samantha Kowalski*

(NOTE: Registered Agent signature required when reinstating)

DATE

2-17-96

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME SABOURIN KAY  
STREET ADDRESS 833 GARDENIA  
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ☐ DELETE

NAME BOOTHE, ELSIE  
STREET ADDRESS 291 CHRISTMAS AVE S.E.  
CITY-ST-ZIP PALM BAY FL 32909

TITLE ☒ DELETE

NAME HOLT, MYRTLE  
STREET ADDRESS PO BOX 226  
CITY-ST-ZIP WINTER BEACH FL

TITLE ☒ DELETE

NAME RUSSELL KATHY  
STREET ADDRESS P.O. BOX 780211 N/A  
CITY-ST-ZIP SEBASTIAN FL 32978

TITLE ☐ DELETE

NAME WATERMAN, RUTH  
STREET ADDRESS 1125 W. BAREFOOT CIR.  
CITY-ST-ZIP BAREFOOT BAY FL 32976

TITLE ☐ DELETE

NAME BRUSSEL, DARLENE  
STREET ADDRESS 7615 131 ST.  
CITY-ST-ZIP SEBASTIAN FL 32958

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

Peggy Shand  
11335 Indian River Dr. #6  
Sebastian, FL 32958

Dale Belis  
191 MAPRY  
Sebastian, FL 32958

SAMANTHA KOWALSKI  
681 Biscayne Ln.  
Sebastian, FL 32958

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03/21/96 01026-00  
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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:

*Ruth E. Waterman, Secy (Ruth E. WATERMAN)* 1/25/96 407-664-2890

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

AS 3-20-96

CR2E037 (12/95)