FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

| DOCUMENT # N43622 (2) | | | | | | | | | | | | | | |
|--|--|-----------------------|---|-----------------------------------|--|--------------------|--------------------|---|--|--|----------------------|--------------------|--------------------------|---------------------|
| FLORIDA MARINE CONSERVATION CORP. | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | | | | L HOUSINGS BLU BIRGOD HISTA BISIND HI | MA JARI BARI | | | III DIRIFIDDI |
| 12295 INDIAN MOUND ROAD 12295 INDIAN MOUND ROAD | | | | | | | | | 3. | Date Incorporated or Qualifie | d | | | |
| LAKE WORTH FL 33467 LAKE WORTH FL 33467 | | | | | | | | | | 05/29/1991 | • | | | |
| | | | | | | | | | | FEI Number | | | Ap | plied For |
| Principal Place of Business 2a. Malling Address | | | | | | | | | | 65-0269724 | | | Not | t Applicable |
| 2. Principal P | lace of Busin | 1088 | | 2e. Malling Address | | | | | 5. | Certificate of Status Desired | | | | dditional guired |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | | | 6. | Election Campaign Financing | | | | lav Be | | |
| 22 | | | | 27 | | | | | | Trust Fund Contribution Added to Fees | | | | |
| City & State | 9 | | | City & State | | | | | 7. | 7. Is this nonprofit corporation a homeowners association? | | | | |
| Zip | | | Country | Zip Zip | | | Country | | | This corporation owes or has | | | ar Inte | anefble |
| 24 | 25 29 | | | | | 30 | _ | _ | | Personal Property Tax due Ju | ine 3 <u>0.</u> | Yes | | No |
| Name and Address of Current Registered Agent | | | | | | | | | 10. | Name and Address of New | Register | ed Agent | | |
| | | | | | | | 81 | Name | | | | | | } |
| HALLMAN-WINDHAM, LEE | | | | | | | | 82 Street Address (P.O. Box Number Is Not Acceptable) | | | | | | |
| 12295 INDIAN MOUND RD. LAKE WORTH FL 33467 | | | | | | | | | | | | | | |
| LINE WORLD FL 33407 | | | | | | | | | | | | | | |
| | | | | | | | | City | FL 85 Zip Code | | | | | |
| 11. Pursuant to office or reagent. I a | to the provisi egistered ag m familiar w | ions ent, th, a | of Sections 617.0502 or both, in the State of accept the obligati | and 617. Florida. ons of, S | 1508, Florida Statut Such change was ection 617.0503, Fk | bove d by | named the cor | corporation poration's b | n submits this statement for the locard of directors. I hereby ac | e purposi cept the s | of chang ppointme | ing its nt as r | registered registered | |
| SIGNATURE | | | | | | | | | | | | | | |
| Signature, typed or printed name of registered agent and title If applicable. (NOTE Reg. 12. OFFICERS AND DIRECTORS | | | | | | | | nt signature | required when | reinstating) ADDITIONS/CHANGES TO OF | DATI | | CTORS | S IN 12 |
| TITLE | D | _ | OF TOCHO AND | DITLOTO | DELETE | 13. DELETE 1.1 TIT | | | <u></u> | 1001101010101010101010101010101010101010 | . TOLITO | Ch | | Addition |
| NAME | | | | | | | | 1.2 NAME | | | | | - | |
| STREET ADDRESS | 12295 IN | NDIA | N MOUND RD. | | | 1.3 \$ | TREET | ADDRESS | ļ | | | | | |
| CITY-ST-ZIP | | | | | | | | .4 CITY-ST-ZIP | | | | | | |
| TITLE | SD DELETE 2.1 | | | | | | | | Trei | aswer 11 | | Cha | ange | ☐ Addition |
| NAME | HANSON, MAURETTE | | | | | | | | Jan | nes w. windha 75 Judian M | 12 | لح لا | | |
| STREET ADDRESS | | | | | | | | ADDRESS ST-ZIP | 122 | re worth f | 1 T | 346 | 7 | |
| CITY-ST-ZIP TITLE | TE TE | 310 | SP | | DELETE | 317 | | 51 - ZIP | <u> </u> | 10 (00)(17) | | Chi | | ☐ Addition |
| NAME | BECKMA | W. I | | | | 3.2 N | | | 1 | | | | | |
| STREET ADDRESS | 3228 SILVER PALM DRIVE | | | | | | 3.3 STREET ADDRESS | | | | | | | Į |
| CITY-ST-ZIP | | | | | | | CITY-S | T-ZIP | | | | | | |
| TITLE | | | | | DELETE | 4.1 T | | | | | | Cha | uđe | ☐ Addition |
| NAME | | | | | | 4.21 | | ; | 1 | | | | | ł |
| STREET ADDRESS | | | | | | | | ADDRESS | | | | | | ľ |
| CITY-ST-ZIP | | | | | DELETE | 4.4 C | ITY-S | ı-ZIP | | | | Cha | noe | Addition |
| NAME | | | | | F-3 | 5.2 N | | | 1 | | | 0 | | |
| STREET ADDRESS | | | | | | 1 | | ADDRESS | 1 | | | | | İ |
| CITY-ST-ZIP | | | | | | - 1 | ITY-S | | <u> </u> | | | | | |

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 frue 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.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE

TITLE

NAME

STREET ADDRESS

-Allman Windlewilles Halmon, Windham

DELETE

5617985853

Change

Addition

FILED

Mar 31 1998 8:00am

Secretary of State

R2E037 (10/97)