

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 23, 1999 8:00 am**  
**Secretary of State**

07-23-1999 90006 028 \*\*\*\*61.25

DOCUMENT # **N44455** ✓

1. Corporation Name

**THE FLAGLER AUDITORIUM GOVERNING BOARD, INC.**

Principal Place of Business

**THE FLAGLER COUNTY SCHOOL BOARD  
STATE ROAD 100  
BUNNELL FL 32110**

Mailing Address

**FLAGLER CO. SCHOOL BOARD  
P.O. BOX 755  
BUNNELL FL 32110**



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

**07/26/1991**

4. FEI Number

**59-3079371**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

**CHIUMENTO, MICHAEL D.  
4 OLD KINGS ROAD NORTH  
PALM COAST FL 32137**

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

TITLE ☐ DELETE  
NAME **P ADAMS, RICHARD**  
STREET ADDRESS **16 WESTFALLS LANE**  
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ DELETE  
NAME **D BERGEN, JOYCE**  
STREET ADDRESS **5 BOYD PLACE**  
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ DELETE  
NAME **D DICKSON, DAVE**  
STREET ADDRESS **125 WOODHAVEN DRIVE**  
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ DELETE  
NAME **S MORRIS, LAURA**  
STREET ADDRESS **500 N CHAPEL**  
CITY-ST-ZIP **BUNNELL FL 32110**

TITLE ☒ DELETE  
NAME **T O'BRIEN, DONALD**  
STREET ADDRESS **55 BOSTON LN**  
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☒ DELETE  
NAME **VP VARNER, DAVE**  
STREET ADDRESS **49 HEMBURY LN**  
CITY-ST-ZIP **PALM COAST FL 32137**

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

SEE NEW  
LIST ATTACHED.

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:

**SIGNATURE REQUIRED** Mark D. Morgan

7/13/99 (904)437-7547

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

0001718

2-16-12-7000-28  
N144455



## 1999-2000 GOVERNING BOARD MEMBERS

Last Name	First Name	Address	City	Zip Code	Home #	Work #	Officers	Term Expires
Adams	Richard	16 Westfalls Lane	Palm Coast	32137	445-3707	446-6109		July 1999
Alleman	Beverly	13 Anastasia Court	Palm Coast	32137	445-4653			July 2000
Bergen	Joyce	5 Boyd Place	Palm Coast	32137	445-5382			July 2000
Carr	James M.	2 Folcroft Lane	Palm Coast	32137	445-4259			July 2000
Dickson	Dave	125 Woodhaven Drive	Palm Coast	32137	446-9323			July 2000
Guines	James T.	3 Woodlyn Lane	Palm Coast	32164	446-0615			EX-Officio
Lusby	David	1 Corporate Drive	Palm Coast	32151	673-8891	445-2646	Vice Pres.	July 2000
Morgan	Mark	17 Woodholme Ln.	Palm Coast	32164	446-3729	437-7547		EX-Officio
Morris	Laura	500 N. Chapel	Bunnell	32110	437-3233			July 2000
Reel	Ralph	9 Blackburn Place	Palm Coast	32137	445-4165		President	July 2000
Vega	John	11 Cayuga Court	Palm Coast	32137	445-8136		Treasurer	July 2002
Walters	Bobbie	46 Captain's Walk	Palm Coast	32137	445-2307		Secretary	July 1999
Williams	Dr. Bob	13 Patton Place	Palm Coast	32164		437-7526		Ex-Officio