FILE NOW: FILING FEE IS \$61.25



JACKSONVILLE FL

KLEINE, CHRISTOPHER

3810 ENGLISH COLONY DRIVE

TITLE NAME

TITL€

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILE NOW: FILING FEE IS \$61.25				FIL	FILED	
NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 10 1997 8:00am Secretary of State		
1		` '	7			
		V.V.		3. Date Incorporated or Qualified 08/28/1991	a. Date of Last Report 04/04/1996	
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number NOT APPLICABLE	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	ө	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25		Country 0	8. This corporation has liability for intan- Florida Statutes	s W No	
i.	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registe	ered Agent	
	ge st Wille FL 32223		82 Street 83 84 City		FL 85 Zip Code	
11. Pursuant office or reagent. I a	to the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the obtained agent to the obt			corporation submits this statement for the purpoporation's board of directors. I hereby accept the y Secretary April 6, required when reinstating) OF	se of changing its registered appointment as registered	
12.	. OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD AMEN	☐ DELETE	1,1 TITLE	PD	Change Addition	
NAME STREET ADDRESS	ROSS, MARY 3737 MOODY RD		1.2 NAME 1.3 STREET ADDRESS	Sybelnik, Tammie		
CITY-ST-ZIP	ORANGE PARK FL		1.4 CITY-ST-ZIP	3731 Hunter Rd. Callahan, FL		
TITLE	VD	☐ DELETE	2.1 TITLE	VD	Change Addition	
NAME	WENDELL, MARY VIRGINIA		2.2 NAME	Brillhart, Susan		
STREET ADDRESS	2630 RIDGECREST AVE		23 STREET ADDRESS	2703 Holly Point Rd. E.		
CITY-ST-ZIP TITLE	ORANGE PARK FL SD	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Orange Park, FL	☐ Change ☐ Addition	
NAME	RIGGIN, JACK		3.2 NAME	SD Duffey Dowle	T cutange T vinorities i	
STREET ADDRESS	4605 SAPHO ST		3.3 STREET ADDRESS	Duffey, Darla 5204 Beige St.		
CITY-ST-ZIP	JACKSONVILLE FL		3,4. C(TY-ST-ZIP	Jacksonville, FL		

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

4.9 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

Duffey, Ernest

5204 Beige St

<u>Jacksonville, FL</u>

Jacksonville, FL

Change

☐ Change

Change

Addition

Addition

Addition