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Jan 26, 1999 8:00am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N45226

Corporation Name

JACKSONVILLE BEACH PATROL ASSOCIATION, INC.

Principal Place of Business

BOX 50954
JACKSONVILLE BEACH FL 32240-0954

Mailing Address

P O BOX 50954
JACKSONVILLE BEACH FL 32240-0954
US



Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

09/19/1991

Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-3088971

Applied For

Not Applicable

City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip Country

25

28 Zip

Country

30

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CMENAMY, WILLIAM B.
10 W. FORSYTH ST.
SUITE 1400
JACKSONVILLE FL 32202

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

NATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DP
WATSON, RONALD R.
RT. 1 BOX 577
MT. CLARE WV 26408

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

D
WATSON, JANIE
RT. 1 BOX 577
MT. CLARE WV 26408

☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

STD
HUTTO, M.C.
1628 THIRD AVE N.
JACKSONVILLE BEACH FL 32250

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

DP
WATSON, JANIE
RT. 1 BOX 577
MT. CLARE WV 26408

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

DP
WATSON, JANIE
RT. 1 BOX 577
MT. CLARE WV 26408

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

DP
WATSON, JANIE
RT. 1 BOX 577
MT. CLARE WV 26408

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: **SYNOPSIS REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-5-99

904-246-7369

CR2E037 (11/98)