

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N47328 (2) 1. Corporation Name RESIDENT INITIATIVE COUNCIL OF BETHUNE VILLAGE, INC.			
Principal Place of Business 814 BETHUNE VILLAGE DAYTONA BEACH FL 32114		Mailing Address 814 BETHUNE VILLAGE DAYTONA BEACH FL 32114	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent RAINGE, GWENDOLYN 972 BETHUNE VILLAGE DAYTONA BEACH FL 32114		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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: <u>Gwendolyn Rainge</u> <u>Gwendolyn RAINGE</u> <u>4/15/99</u> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME RAINGE, DONOFA STREET ADDRESS 811 BETHUNE VILLAGE CITY-ST-ZIP DAYTONA BEACH FL 32114		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	
TITLE VPT NAME JACKSON, LEONA STREET ADDRESS 931 BETHUNE VILLAGE CITY-ST-ZIP DAYTONA BEACH FL 32114		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
TITLE S NAME RAINGE, GWENDOLYN STREET ADDRESS 972 BETHUNE VILLAGE CITY-ST-ZIP DAYTONA BEACH FL 32114		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE T NAME BRANCH, MARY STREET ADDRESS 943 BETHUNE VILLAGE CITY-ST-ZIP DAYTONA BEACH FL 32114		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE PT NAME LINDSAY, WILLIE STREET ADDRESS 365 BETHUNE VILLAGE CITY-ST-ZIP DAYTONA BEACH FL 32114		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
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. SIGNATURE: <u>Gwendolyn L. Rainge</u> <u>Gwendolyn L. RAINGE</u> <u>4/11/98</u> <u>239-6836</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

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