FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

•	998 DIVISION OF CORPORATIONS			Scoretary of State		
DOCUI 1. Corporation	MENT # N490	(3))			
OPERA	TION MANGROVE, INC.					
						l
Principal Place	e of Business	Mailing Address				ll l
3422 CLUB HOUSE BUILDING PO BOX 345					9. Floto language of a Constitled	
JENSEN BEACH FL 34957 US JENSEN BEACH FL 34957 US JENSEN BEACH FL 34957 US					3. Date Incorporated or Qualified 05/22/1992	
			4957		4. FEI Number Applied Fo	r
					65-0338498 Not Applica	_
	ace of Business	2a. Mailing Address	28. Mailing Address		5. Certificate of Status Desired Security \$8.75 Additional	!
Suite, Ap1	#, etc	Suite, Apt. #, etc	 ====		Fee Required 6. Election Campaign Financing \$5.00 May Be	
22		27			Trust Fund Contribution	
City & State)	City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Country	28	Cour	etry	Yes No 8. This corporation owes or has paid the current year Intaggible	
24	25	29	30	,	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cui	rent Registered Agent			10. Name and Address of New Registered Agent	
4654.55			ľ	B1 Name		
KEHOE, PHYLLIS C			[1	B2 Street Add	dress (P.O. Box Number is Not Acceptable)	
4165 SE CENTERBOARD LANE SUITE 617			ļ.	83		
STUART FL 34997			-	B4 City	85 Zip Code	
				1 1	FL '	
11. Pursuant to office or to	to the provisions of Sections 617.1 egistered agent, or both, in the St	0502 and 617.1508, Florida \$ late of Florida. Such change:	Statutes, the ab- was authorized	ove-named cor by the corpora	rporation submits this statement for the purpose of changing its register ation's board of directors. I hereby accept the appointment as registers	red ed
agent. I a	m familiar with, and accept the of	uligations of, Section 617.050	3, Florida Statu	ites.	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE _	Signature, typed or printed name of regulators	d agent and tiln if applicable	(NOTE Registered	Agent signature requ	ulred when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	DELET			Change Add	ition
NAME	FIELDS, KENNETH A	D A 400	1.2 NA			
STREET ADDRESS	3472 NE CAUSEWAY BLVI JENSEN BEACH FL	D. 3 103	- 1	EET ADDRESS		
CITY-ST-ZIP TITLE	D DENOCH DEACH PL	☐ DELET		r-st-zip .E	☐ Change ☐ Add	ition
NAME	BELMONT, HERMAN S.		2.2 NA	ME		
STREET ADDRESS	3472 NE CAUSEWAY BLV	D 3 401	23 STR	EET ADDRESS		
CITY-ST-ZIP	JENSEN BEACH FL			Y-ST-ZIP		
TITLE	SD CALLY	☐ DELET			Change Add	ition
NAME Proces Approces	SANBERG, SALLY 624 ST LUCIE CRESENT 1	ine	3.2 NAM			
STREET ADDRESS CITY-ST-ZIP	STUART FL	100		EET ADDRESS Y-ST-ZIP		
TITLE	PD	DELET!			☐ Change ☐ Add	ition
NAME	KIRILUK, MIRIAM B.		4. 2 NA	MÉ		
STREET ADDRESS	370 NE EDGEWATER DRIV	Æ 201	4.3 STR	EET ADORESS		
CITY-ST-ZIP	STUART FL	777		Y-ST-ZIP		
TITLE	THANKEDY ODAGE	☐ DELET	4	1	Change	ЛЮП
NAME STOLET ADDRESS	THACKERY, GRACE 3392 NE CAUSEWAY BLV	D & 101	5.2 NAM	1		
STREET ADDRESS City-St-Zip	JENSEN BEACH FL	D. 0 101		EET ADDRESS (-ST-ZIP		
TITLE	VEHICLI PENVILLE	DELETI			☐ Change ☐ Add	ition
NAME			6.2 NAM			
STREET ADDRESS			6.3 STR	EET ADDRESS		

14. Thereby 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 conversion or the receiver or trustoe empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 of Block 12 if Changed, or on an attachment with an address.

SIGNATURE

MIRIDA

B. KIRILUK

3/21/98 2

FILED

Mar 26 1998 8:00am

Secretary of State

50/ <u>\$25</u>-20/5