

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N51179 (2)**

1. Corporation Name
PIGEON KEY PRESERVATION FOUNDATION, INC.



Principal Place of Business Mailing Address
MILEMARKER 45. OLD SEVEN MILE BRIDGE MARATHON FL 33050 **PO BOX 500130 MARATHON FL 33050**

3. Date Incorporated or Qualified **10/02/1992** 3a. Date of Last Report **05/01/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0379803		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28					
Zip	Country	Zip	Country				
24	25	29	30				

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THACKER, RAY
MM45 OLD SEVEN MILE BRIDGE
MARATHON FL 33050

81 Name	Dave Whitney		
82 Street Address (P.O. Box Number is Not Acceptable)	MM45 Old Seven Mile Bridge		
83			
84 City	Marathon	85 State	FL
		86 Zip Code	33050

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 *Dave Whitney* **Dave Whitney, Executive Director 1/16/96**
Signature and printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DV	<input type="checkbox"/> DELETE
NAME	MURRAY, TRUDY	
STREET ADDRESS	1100 INDIES DR S.	
CITY-ST-ZIP	DUCK KEY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAKEPEACE, DAVID	
STREET ADDRESS	83311 OLD HWY.	
CITY-ST-ZIP	TAVERNIER FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	RICE, DAVID	
STREET ADDRESS	3000 41ST ST OCEAN	
CITY-ST-ZIP	MARATHON FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	GALLAHER, DANIEL	
STREET ADDRESS	211 SCHOONER LN	
CITY-ST-ZIP	DUCK KEY FL 33050	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	THACKER, RAY	
STREET ADDRESS	PO BOX 500130	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	Executive Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Dave Whitney	
1.3 STREET ADDRESS	MM45 Old Seven Mile Bridge	
1.4 CITY-ST-ZIP	Marathon, FL 33050	
2.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	George Nugent	
2.3 STREET ADDRESS	14749 Quivers Hwy	
2.4 CITY-ST-ZIP	Marathon, FL 33050	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or in an attachment with an address.

SIGNATURE: *Dave Whitney* **Dave Whitney 1/16/96 305/289-0025**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)