

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90002 003 ****61.25

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1. Entity Name
FLORIDA ASSOCIATION OF BENTHOLOGISTS, INC.



Principal Place of Business
**6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608**

Mailing Address
**6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608**

44050622



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07062004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-3156064

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**EVANS, DAVID L
6821 S.W. ARCHER ROAD
GAINESVILLE, FL 32608**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	S	☒ Delete
NAME	MINNO, MARE	
STREET ADDRESS	3JR WMD HWY 100 WEST	
CITY-ST-ZIP	PALATKA, FL 32177	
TITLE	SD	☒ Delete
NAME	RUTTER, ROBERT P	
STREET ADDRESS	7451 GOLF COURSE BLVD	
CITY-ST-ZIP	PUNTA GORDA, FL	
TITLE	TD	☒ Delete
NAME	BONNIE, HALL	
STREET ADDRESS	8407 LAUREL FAIR CIR	
CITY-ST-ZIP	TAMPA, FL 33610	
TITLE	PD	☐ Delete
NAME	KARLEN, DAVID	
STREET ADDRESS	1410 N 21ST ST	
CITY-ST-ZIP	TAMPA, FL 33605	
TITLE	SD	☒ Delete
NAME	PLUCHINO, MARIANNE	
STREET ADDRESS	1900 HOTEL PLAZA BLVD	
CITY-ST-ZIP	LAKE BUENE VISTA, FL 32830	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Palmer Kinser	
STREET ADDRESS	4049 Reid Street	
CITY-ST-ZIP	Palatka, FL 32177	
TITLE	SD	☐ Change ☒ Addition
NAME	Laura Line	
STREET ADDRESS	6821 S.W. Archer Road	
CITY-ST-ZIP	Gainesville, FL 32608	
TITLE	TD	☐ Change ☒ Addition
NAME	Sandi Hanlon-Breuer	
STREET ADDRESS	15847 Chestnut Lane	
CITY-ST-ZIP	Tavares, FL 32778	
TITLE	David Karlen	☒ Change ☐ Addition
NAME	David Karlen	
STREET ADDRESS	1410 N. 21st Street	
CITY-ST-ZIP	Tampa, FL 33605	
TITLE	SD	☐ Change ☒ Addition
NAME	Dana Denson	
STREET ADDRESS	3319 Maguire Blvd.	
CITY-ST-ZIP	Orlando, FL 32803	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sandi Hanlon-Breuer

7-21-04 352-742-7798