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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra 3. Mortham

Secretary of State

1998

DIVISION OF CORPORATIONS

DOCUMENT # N93000004172 (3)

GULFSTREAM ENVIRONMENTAL EDUCATION INSTITUTE, IN C.

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Principal Place of Business Mailing Address						-		- I TEORIDI DIO LOIDO ITINI DALLI DELLI GONI CONTI ESTE DIDON LIDIN LOGIO MOL 1001		
3945 FIRST AVE S			P O BOX 17112					9 Data have a land of the land		
ST. PETERSBURG FL 33711			ST. PETERSBURG FL 33733					3. Date incorporated or Qualified		
US			US	į.				09/15/1993		
								4. FEI Number EW-57-3367036 X Applied For APPLIED FOR Not Applicate	ble	
2. Principal f	Place of Busin	1035	20.	Mailing Address						
21			26					6. Certificate of Status Desired \$8.75 Additional Fee Required		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be		
22			27					Trust Fund Contribution Added to Fees		
City & State			City & State					7. Is this nonprofit corporation a homeowners association?		
23	<u> </u>		26					☐ Yes X No		
Zip	` — ` · · · · · ·			Zip Country			У	8. This corporation owes or has paid the current year Intengible		
24 25 9. Name and Address of Current				29 30 Basistand Agent				Personal Property Tax due June 30. Yes No		
	- raile	BIRD ADDITION OF CUITAIN	Madie	mien väeur		81	Name	10. Name and Address of New Registered Agent		
14460	AI DOMAN	DOBERTA O					1101110			
LAWSON-BROWN, ROBERTA S 3945 FIRST AVE S						82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	TERSBURG					83	<u> </u>			
31. FE	ENODUNG	rt 99/11				~	1			
•						84	City	B5 Zip Code		
11. Pursuant	to the provisi	ions of Sections 617.0502	and 6	17.1508, Florida Statut	es. the a	boy	re-named corpo	pration submits this statement for the purpose of changing its registere	ad	
office or I	registered ag	ent, or both, in the State of	Florid	da. Such change was a	authorize	d by	y the corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	í	
	1 d Ma	Frank Min	IM	1, 900(1011 017.0003, PIC	Jriua Stai	iule:	Dharts			
SIGNATURE	Signature, typed	or printed name of registered agent	and title	uf applicable (NOT	E: Registere	d Age	ent signature require		_	
12.		OFFICERS AND	DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD			☐ DELETE	1.1 TI	TLE		☐ Change ☐ Additi	on	
NAME	LAWSO	n-Brown, Roberta (ŝ		1.2 N	AME				
STREET ADDRESS										
CITY-S1-ZIP	i st. peti	rst ave s			1.3 S1	TREET	T ADDRESS			
TITLE		rst ave s Ersburg fl					T ADDRESS ST-ZIP			
	PD	ERSBURG FL		☐ DELETE		ITY-S		☐ Change ☐ Addition	on	
NAME	PD LAWSON	ERSBURG FL N, JOHN A	· · · · · · · · · · · · · · · · · · ·	☐ D€LETE	1.4 CI	ITY-S TLE		☐ Change ☐ Addition	on	
NAME STREET ADDRESS	PD LAWSON 3945 FM	ERSBURG FL N, JOHN A RST AVE S		☐ D€LETE	1.4 CI 2.1 TI 2.2 N/	TLE AME		☐ Change ☐ Addition	on	
STREET ADDRESS CITY-ST-ZIP	PD LAWSON 3945 FIF ST. PET	ERSBURG FL N, JOHN A			1.4 CI 2.1 TI 2.2 N/ 2.3 SI	TLE AME TREET	ST-ZIP	☐ Change ☐ Addition	on	
STREET ADDRESS CITY-ST-ZIP TITLE	PD LAWSON 3945 FM ST. PETI D	ERSBURG FL N, JOHN A RST AVE S ERSBURG FL		☐ DELETE	1.4 CI 2.1 TI 2.2 N/ 2.3 SI	TLE AME TREET	ST-ZIP T ADDRESS	☐ Change ☐ Addition		
STREET ADDRESS CITY-ST-ZIP TITLE MAME	PD LAWSON 3945 FIF ST. PETI D GIMENO	ERSBURG FL N, JOHN A RST AVE S ERSBURG FL N, MICHEL M.D.			2.1 Ti 2.2 Ni 2.3 Si 2.4 G	TLE AME TREET SITY - S	ST-ZIP T ADDRESS	· ·		
STREET ADDRESS CITY-ST-ZIP TITLE	PD LAWSON 3945 FIF ST. PETI D GIMENO 2505 DE	ERSBURG FL N, JOHN A RST AVE S ERSBURG FL N, MICHEL M.D. EER RUN EAST			1.4 CI 2.1 TI 2.2 NV 2.3 SI 2.4 C 3.1 TI 3.2 NV	TLE AME TREET TLE TLE AME	ST-ZIP T ADDRESS	· ·		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAWSON 3945 FIF ST. PETI D GIMENO 2505 DE	ERSBURG FL N, JOHN A RST AVE S ERSBURG FL N, MICHEL M.D.		DELETE	1.4 CI 2.1 TI 22 NV 2.3 SI 2.4 C 3.1 TI 3.2 NV 3.3 SI 3.4. C	TLE AME TREET TLE AME TREET	T ADDRESS ST-ZIP	☐ Change ☐ Additi-	on	
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STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD LAWSON 3945 FIF ST. PETI D GIMENO 2505 DE	ERSBURG FL N, JOHN A RST AVE S ERSBURG FL N, MICHEL M.D. EER RUN EAST		DELETE	1.4 CI 2.1 TI 22 NV 2.3 SI 2.4 C 3.1 TI 3.2 NV 3.3 SI 3.4. C	TTY-S TLE AME TREET TLE AME TREET TLE TREET TLE TLE	T ADDRESS ST-ZIP	☐ Change ☐ Additi-	on	
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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 atjachment with an address.

SIGNATURE:

John A. Lawson 4-17-98 (813) 321-7363

FILED

May 01 1998 8:00am

Secretary of State

À INVINIO DI PIR 1818 PERE CONSTRUIT PRINCOLLO CON CERCO MONTRALI DE MASSER DE MARCINES PRESENTANTES PRESENTA

CR2E037 (10/97)