SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## N93000005114 DOCUMENT #

1. Corporation Name

MS. FLORIDA SENIOR CITIZEN PAGEANT, INC.

Principal Place of Business

3714-61ST STREET WEST **BRADENTON FL 34209** 

Mailing Address

3714-61ST STREET WEST BRADENTON FL 34209

## **FILED** Jul 09, 1999 8:00 am Secretary of State

07-09-1999 90002 007 \*\*\*\*61.25



2. Principal Pi	Jace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 11/08/1993		1	
1 . 3 / / T					4. FEI Number		plied For	
Suite, Apt. #, etc.			-		65-0450817	<del> </del>	t Applicable	
City & State City & State							Additional	
I I) RADENTUN TL 28					5. Certificate of Status Desired	Fee Re		
Zip Country Zip Co				,	6. Election Campaign Financing	\$5.00	May Be	
4] 34209 [25] MAWATEL [29] 30]					Trust Fund Contribution	Added to		
	9. Name and Address of Current I	Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registere	d Agent		
			81	Name				
WATTLES, JUNE E				82 Street Address (P.O. Box Number is Not Acceptable)				
3714-61ST STREET WEST								
BRADENTON FL 34209								
			84	City		85 Zip C	Code	
				1	F			
11. Pursuant i	to the provisions of Sections 617.0502 a	and 617.1508, Florida Statutes, Florida, Such change was auth	the abov orized by	e-named corporation	poration submits this statement for the purpose of ion's board of directors. I hereby accept the app	of changing its ointment as reg	registered gistered	
agent. I a	m familiar with, and accept the obligation	ns of, Section 617,0503, Florida	Statutes	).	W 1 GG	·	· [	
SIGNATURE	Cherry To	Midettels			nd when rejnetation)			
	Signature, reped or printed name of regulared agent and title if applicable. (NOTE: Registered OFFICERS AND DIRECTORS 13.			nt signature require	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12	
IZ.	D OFFICERS AND	DELETE 1.11			ADDITIONS/ONANGES TO OTT IDENO!	Change	Addition	
AME	WATTLES, JUNE E		1.2 NAME			_ ,		
TREET ADDRESS	3714-61ST STREET WEST			T ADDRESS				
	BRADENTON FL 34209			T-ZIP			Ì	
ITY-ST-ZIP			2.1 TITLE			Change	☐ Addition	
AME	WATTLES, RICHARD		2.2 NAME				}	
TREET ADDRESS	3714-61ST STREET WEST		2.3 STREE	T ADDRESS				
rry-st-zip	BRADENTON FL 34209		2.4 CITY-	\ \			)	
MLE	D DELETE		3.1 TITLE			Change -	. Addition	
AME .	DONOVAN, MARY-J		3.2 NAME					
TREET ADDRESS	149 PINE NEEDLE DRIVE		3.3 STREE	T ADDRESS				
TTY-ST-ZIP	BRADENTON FL 34210		3.4. CITY-5	ST-ZIP				
TLE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
AME			4. 2 NAME					
TREET ADORESS		i .	4.3 STREE	T ADDRESS				
TY-ST-ZIP			4.4 CITY-S	T-ZIP				
TLE	Market Commencer	☐ DEFELE	5.1 TITLE			Change	☐ Addition	
AME	i.		5.2 NAME					
TREET ADDRESS			1	T ADDRESS				
TY-ST-ZIP	<u> </u>		5.4 CITY-S	T-ZIP			□ A J##;=	
TLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
4ME			6.2 NAME					
IDEET ADDDESS			6.3 STREE	T ADDRESS			i	

4. 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, with all other like empowered.

6.4 CITY-ST-ZIP

**3IGNATURE:** 

TY-ST-ZIP