

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Sep 19 1997 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # N94000000164 (3)
 1. Corporation Name
INTERNATIONAL EROSION CONTROL ASSOCIATION - SOUTHEASTERN CHAPTER, INC.



Principal Place of Business 10276 RIVERSIDE DRIVE PALM BEACH GARDENS FL 33410	Mailing Address 10276 RIVERSIDE DRIVE PALM BEACH GARDENS FL 33410
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>SAME</u>		2a. Mailing Address 26 <u>SAME</u>		3. Date Incorporated or Qualified 01/12/1994	3a. Date of Last Report 05/01/1996
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 65-0600884	Applied For Not Applicable
City & State 23		City & State 28		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent HACKETT, ANDREW K 10 BAY HARBOR RD. TEQUESTA FL 33469				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent 81 Name <u>SAME</u>				85. Zip Code	
82 Street Address (P.O. Box Number is Not Acceptable)				FL	
83					
84 City					

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 Andrew K. Hackett, Treasurer Andrew K. Hackett DATE 7/21/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DT	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HACKETT, ANDREW K		1.2 NAME	
STREET ADDRESS 10 BAY HARBOR RD.		1.3 STREET ADDRESS	
CITY-ST-ZIP TEQUESTA FL 33469		1.4 CITY-ST-ZIP	
TITLE DP	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MURRY, STEPHEN W		2.2 NAME	DV
STREET ADDRESS 2000 CLEARVIEW AVE., NE		2.3 STREET ADDRESS	
CITY-ST-ZIP ATLANTA GA 30340		2.4 CITY-ST-ZIP	
TITLE DV	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PAINTER, J.D.		3.2 NAME	DP
STREET ADDRESS P.O. BOX 3927		3.3 STREET ADDRESS	
CITY-ST-ZIP BIRMINGHAM AL		3.4 CITY-ST-ZIP	
TITLE DS	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KNOCK, TERRI		4.2 NAME	
STREET ADDRESS 3500 PARKWAY LANE SUITE 500		4.3 STREET ADDRESS	
CITY-ST-ZIP NORCROSS GA		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: Andrew K. Hackett **ANDREW K. HACKETT**

CR2E037 (4/97)