FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

N95000000085 (9)

THE GREATER PENSACOLA JUNIOR GOLF ASSOCIATION, I

Principal Place of Business
3200 COBBLESTONE DR.

Mailing Address

3200 COBBLESTONE DR. PACE FL 32571-9587

FILED May 16 1997 8:00am Secretary of State



PACE FL 32571		PACE FL 32571-9587		·	
				3. Date incorporated or Qualified 01/06/1995	3a. Date of Last Report 03/12/1996
	lace of Business Uest Main St	2a. Mailing Address 26 P.O. Box 12	30 3	4. FEI Number 59-3288799	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	Certificate of Status Desired	\$8.75 Additional
		27			Fee Required
City & State 23 Pent	sacola Florida	28 Pensacola	. Floria	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 325	Country	Zip 29 32581-2303 30	Country	8. This corporation has liability for in Florida Statutes	tangible tax under s. 199.032,
	9. Name and Address of Current		The Carrier	10. Name and Address of New Reg	
81 Name -> // - / /					
СООК	HIRAM J JR	Bill Fedowich Address (P.O. Box Number is Not Acceptable	~}		
5601 WOODBIONE ROAD				7225 Woodrun CT.	3)
PACE F					
1	_		84 City •		es Zin Code
				Pensacola corporation submits this statement for the pu	FL 32314
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.					
agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE COURT & File S					
	Signature, typed or printed name of registered agent			required when reinstalling)	DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12 Change Addition
TITLE	D D	F" DEFECTE	1.1 TITLE	Forimore Mark L.	C Citalina To vocition
NAME	COOK, HIRAM J JR		1.2 NAME	Fenimore, Mark L. 3858 Sabertooth Cr.	į
STREET ADORESS	5601 WOODBINE ROAD PACE FL 32571		1.3 STREET ADDRESS	Gulf Breeze, Fl 32	5561
CITY - ST - ZIP	D, P	DELETE	1.4 CITY-ST-ZIP	AV Dreeze, FI DA	Change Addition
NAME	FÉDOWICH, WILLIAM J JR	C OFFER	2.2 NAME	Steve Bobe	
STREET ADDRESS	9225 WOODRUN COURT		2.3 STREET ADDRESS	7140 Bahama Rd.	
CITY-ST-ZIP	PENSACOLA FL 32514		2. 4 CITY-ST-ZIP	Pensagola, F1 325	04
TITLE	0	DELETE	3.1 TITLE	D	Change Addition
NAME	BOWDEN, BO		3.2 NAME	Dale Goolsby	
STREET ADDRESS	8635 BELLE MEADOW BLVD.		3.3 STREET ADDRESS	5663 Doral Dr.	
CITY-ST-ZIP	PENSACOLA FL 32514		3.4. CITY-ST-ZIP	Pace, FI 3257	"
TITLE	D	DELETE	4.1 TITLE	D	Change Addition
NAME	DOTSON, STEVE	• •	4. 2 NAME	Mark Cook 1 7.	
STREET ADDRESS	221 FLORIDA AVE.		4.3 STREET ADDRESS	3113 Cobblestone Dr	•
CITY-ST-ZIP	GULF BREEZE FL 32561		4.4 CITY - ST - ZIP	Pace, FI 325	71
TITLE	D, S	DELETE	5.1 TITLE	D	Change Addition
NAME	WELLS, KATHY		5.2 NAME	Andy Duchesne	
STREET ADDRESS	5895 TANGLEWOOD DR.		5.3 STREET ADDRESS	4030 Bedevere Dr	
CITY-ST-ZIP	MILTON FL 32570		5.4 CITY-ST-ZIP	Pensacola F1 32	514
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change ♣ Addition
NAME			6.2 NAME	Jack Green,	
STREET ADDRESS			6.3 STREET ADDRESS	6750 Dasta St.	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	Pensacola F1 32	504
1 44 1 1	to a construction of the c	(4) (1) (40) (1)	·	the district of the day of the day of the	مطفوم بالقراق الأرام والمرام والم والمرام والم

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:

MALE STATE MATERIAL STATE OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-28-97

904-932-035/ Dayline Phone | 0074849