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NONPROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

Principal Place of Business

N95000001204 (5)

Mailing Address

FRIENDS OF THE STYLEMARCHERS, INC.

1201 EGLIN PARKWAY 1201 EGLIN PARKWAY SHAUMAR FL 32579-1206 SHALIMAR FL 32579 3. Date Incorporated or Qualified 3a. Date of Last Report 03/13/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLEET, H. BART 82 Street Address (P.O. Box Number is Not Acceptable) 1201 EGLIN PARKWAY 83 SHALIMAR FL 32579 84 City Zip Code 85 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 Signative, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 96/6) 13. TITLE D DELETE 11 TITLE Change **BOUNDS, RICHARD** NAME 12 NAME HEMMER ALLEN R 22 MAPLE AVENUE 110 N.W. RACETRACK ROAD STREET ADDRESS 13 STREET ADDRESS FL 32579 FORT WALTON BEACH FL 32548 SHALIMAR, CITY - ST - 70F 1.4 CITY-ST-ZIP TITLE SD DELETE 21 TITLE Change PATRICK, JEFFERY C. MCALLISTER, RAY H. NAME 22 NAME 200 DEVON COURT STREET ADDRESS 140 COUNTRY CLUB DRIVE 23 STREET ADDRESS FORT WALTON BEACH, FL. 32547 SHAUMARFL 32579 2 4 CITY-ST-ZIP CITY - ST - ZIF ☐ DELETE TITLE 31 TITLE ☐ Change ☐ Addition RACETRACK ROAD W. NELSON, RANDY NAME 3.2 NAME 110 N.W. RACETRACK ROAD STREET ADDRESS 33 STREET ADDRESS FORT WALTON BEACH FL 32548 3 4. CITY-ST-ZIP FORT WALTON BEACH, C(TY - ST - Z)F DELETE 4.1 TITLE Change Addition TITLE PD) NAME FLEET, H. BART 4 2 NAME 1201 EGLIN PARKWAY STREET ADDRESS 43 STREET ADDRESS SHALIMAR FL 32579 CITY - ST - ZIF 44 CITY-ST-ZIP DELETE Change 51 TITLE Addition TITLE NAME STEARNS, ALLEN 52 NAME 908 MIDDLE DRIVE STREET ADDRESS 5.3 STREET ADDRESS FT WALTON BEACH FL 32547 CITY-ST-ZIF 54 CITY-ST-ZIP ___ Addition DELETE Change TITLE 6.1 TITLE BARBARA, KENT NAME 6.2 NAME KENT, BARBARA 648 MERIONETH DRIVE STREET ADDRESS **63 STREET ADDRESS** FT WALTON BEACH FL

appears in Block 12 or Block 13 if changed, or on an attachment with an address HOME (904) 651-0926 SIGNATURE: allen R. Hemmer ALLEN R. HEMMER JAN 13,97 WORK (904) 882-286

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

CITY-ST-ZIF FT WALTON BEACH FL 32547

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

FILED

Jan 23 1997 8:00am

Secretary of State