FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 17 1997 8:00am

Secretary of State

Change

__ Change

Change

☐ Addition

Addition

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

· 魔都是不是有人。 我们因为了我们有一种的人们是我们的人的人,我们也是我们的人们的人们的人们的人们是我们的人们们的人们,可以

N95000001492 (6)

PENSACOLA MARITIME PRESERVATION SOCIETY, INC.

PENSACOLA FL 32503

PENSACOLA FL 32505

1313 NORTH PACE BOULEVARD

SOULE, JOHN

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

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Principal Plac	ce of Business	Mailing Address		n toothiler alle tskiet Birki eerri serri serri ootke maliti belek tiëri diele felik iser 1001			
1800 NORTH PALAFOX STREET 1600 NORTH PALAFOX STREET PENSACOLA FL 32501-2137			EET				
			_		3. Date Incorporated or Qualified 03/23/1995	3a. Date of Last Report 04/25/1996	
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-3319933	Applied For Not Applicable		
Sulte, Apt. #, etc.		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	25 29 30		Country	'	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
9. Name and Address of Current Registered Agent				,	10. Name and Address of New Registered Agent		
				Name	e		
CALLAWAY, MARY M 1600 NORTH PALAFOX STREET PENSACOLA FL 32501			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			"				
			83	83			
			84	City		FL 85 Zip Code	
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 617.1508, Florida Statutes, of Florida: Such change was aut dions of, Section 617.0503, Floric	the above horized by la Statute:	e-named · / the corp s.	corporation submits this statement for the pu oration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered agen	·		nt signature	required when reinstating)	DATE	
12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		·	Change Addition	
NAME	BROWN, WARREN T		1,2 NAME				
STREET ADDRESS	40 AUDUSSON AVENUE		1.3 STREET ADDRESS				
CITY-ST-ZIP	PENSACOLA FL 32507	7 1.4		T-ZIP			
TITLE	D	☐ DELETE 2.11				☐ Change ☐ Addition	
NAME			2.2 NAME]			
STREET ADDRESS	4400 BAYOU BOULEVARD		2.3 STREET	ADDRESS			

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 charged, or on an attachment with an address.

2. 4 CITY - ST - ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CiTY-ST-ZIP

3.4. CITY - \$1 - ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE