


FILE NOW: FILING FEE IS \$61.25

FILED
Jun 04 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 # N95000002165 (7)
1. Corporation Name
LEMON BAY CHORD INC.



Principal Place of Business: 1218 JEFFERSON DR ENGLEWOOD FL 34224
Mailing Address: 1218 JEFFERSON DR ENGLEWOOD FL 34224-4618

3. Date Incorporated or Qualified: 05/05/1995
3a. Date of Last Report: 08/20/1996
4. FEI Number: 65-0466469
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent
RAPP, DONALD F
1218 JEFFERSON DR
ENGLEWOOD FL 34224

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

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 _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	VPD <input type="checkbox"/> DELETE
NAME	STURROCK, JOHN A
STREET ADDRESS	1501 BEACH ROAD #209
CITY-ST-ZIP	ENGLEWOOD FL 34223
TITLE	TD <input type="checkbox"/> DELETE
NAME	RAPP, DONALD F
STREET ADDRESS	1218 JEFFERSON DR
CITY-ST-ZIP	ENGLEWOOD FL 34224
TITLE	VP <input type="checkbox"/> DELETE
NAME	WALKER, BLAIR
STREET ADDRESS	6142 PULCO ST
CITY-ST-ZIP	ENGLEWOOD FL 34224
TITLE	SD <input checked="" type="checkbox"/> DELETE
NAME	WOODWORTH, DONALD A
STREET ADDRESS	2018 WILLOW LANE
CITY-ST-ZIP	ENGLEWOOD FL 34224
TITLE	VPD <input checked="" type="checkbox"/> DELETE
NAME	VNING, EARL
STREET ADDRESS	OCMHP #91 SAN CASA
CITY-ST-ZIP	ENGLEWOOD FL 34224
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	STURROCK, JOHN A
1.3 STREET ADDRESS	1501 BEACH ROAD #209
1.4 CITY-ST-ZIP	ENGLEWOOD, FL 34223 D.
2.1 TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	RAPP DONALD F
2.3 STREET ADDRESS	1218 JEFFERSON DRIVE
2.4 CITY-ST-ZIP	ENGLEWOOD FL 34224 D.
3.1 TITLE	BOARD MEMBER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	WALKER, BLAIR
3.3 STREET ADDRESS	6142 PHILCO ST
3.4 CITY-ST-ZIP	ENGLEWOOD FL 34224 D.
4.1 TITLE	V.P. DEVELOPMENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	DALEY, ROBERT
4.3 STREET ADDRESS	2780 10TH STREET
4.4 CITY-ST-ZIP	ENGLEWOOD FL 34224
5.1 TITLE	V.P. MUSIC <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	LINDSEY, RICHARD
5.3 STREET ADDRESS	22375 EDGEWATER DR #132
5.4 CITY-ST-ZIP	PT CHARLOTTE FL 33980
6.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	HAPPOLDT, ROBERT
6.3 STREET ADDRESS	7581 RATON CIRCLE
6.4 CITY-ST-ZIP	PT CHARLOTTE, FL 33981

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.

CR2E037 (9/96)