FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 10 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N95000002167 (3)

FRIENDS ACROSS THE SEA, INC.

Principal Place of Business Mailing Ad		Mailing Address		E ADBITTOL DID HANDL DITAH DRIPH DRIPH DRIPH DRIPH DRIPH DITAH BIRIN DRIPH BIRIH BIR	
2106 SAWGRASS VILLAGE		2106 SAWGRASS VILLAGE		3. Date Incorporated or Qualified	
PONTE VEDRA BEACH FL 32082		PONTE VEDRA BEACH FL 32082		05/01/1995	
				4. FEI Number Applied For	
				59-3348609 Not Applica	
· ·	lace of Business	2a. Mailing Address		CO 75 Additions	1
Suite, Apt.	# alc	26 9737 1885	TON IRA	/C Fee Required	
22	#, U IC.	Suite, Apt. #, etc.	a Rout	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
City & State	9	City & State	n exe, c	7. Is this nonprofit corporation a homeowners association?	
23		28		Yes SHOOM CORPORATION & NOTHER ASSOCIATION?	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25		ST JOH.	Personal Property Tax due June 30. Yes No	
				10. Name and Address of New Registered Agent	
B1				THICK MORGAN	
HILL, WILLIAM H JR.			62 Street	t Address (P.Q. Box Number is Not Acceptable)	
2106 SAWGRASS VILLAGE			83 9	737 PRESTON TRAIL	
PONIE	VEDRA BEACH FL 32082		5		
			84 C(p)	(Const. Code 85 Zip Code	
11. Pursuant t	to the provisions of Sections 617 0500	2 and 617 1508. Florida Statutes	the above-names	WEVERRA BEACH FL 85 Zip Code 32082 d corporation submits this statement for the purpose of changing its register	
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 11.0503, Florida Statutes.					
SIGNATURE _	Signature, the desprinted name of registered ager	it and little if applicable (NOTE: I	Registered Agent signatur	re required when reinstating) DATE	—
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	DELETE	1.1 TITLE	DS // Change Addi	ition
NAME	HILL, WILLIAM H JR.	•	1.2 NAME	DEBORAH HICKS	
STREET ADDRESS	2106 SAWGRASS VILLAGE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL	3	1.4 CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
TITLE	DP DP	☐ DELETE	2.1 TITLE	Change 28 Addi	tion
NAME	MORGAN, JACK		2.2 NAME	JOANNE CODY 541 LEMASTER DR	
STREET ADORESS	9737 PRESTON TRAIL PONTE VEDRA BEACH FL	22642	2.3 STREET ADDRESS	54/ 18/1/15/2	
CITY-ST-ZIP TITLE	DVP	32083. □ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	POWTE VEDRA BCH, FL 82082	Han
NAME	GEBHART, MARY		3.2 NAME	Teresa de Balmaseda Hilam	HOU
STREET ADORESS	23 VILLAGE WALK CT.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL	32082	3.4. CITY - ST - ZIP	PONTE VEDER BEACH, FL 32004	
TITLE	DT	DELETE	4.1 TITLE	I Change I X Addi	tion
NAME	KIDDA DVIII	Mark Co. Same	4. 2 NAME	JACKIE ROONEY 9652 PRESTON TR. W PONTE VEDRA BCH, FL 32082	
STREET ADDRESS	-13-00VE ND IIS ALS/	ACE OT,	4.3 STREET ADDRESS	9652 PRESTON TR. W	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	32082	4.4 CITY-ST-ZIP	PONTE VEDRA BCH, FL 32082	-
TITLE	DT	DELETE	5.1 TITLE	I Channe L Addi	
NAME	HARRISON, PAUL M.D.		5.2 NAME	JOSEPHINE SOLOT	
STREET ADDRESS	1615 SEABREEZE AVENUE		5.3 STREET ADDRESS	121 ALSACE CT	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	Tari ser	5.4 CITY-ST-ZIP	PONTE VEDEN BCH, FL 32082	
TITLE	DS	DELETE	6.1 TITLE	1 / Change LAddii	tion
NAME OTREET ADDRESS	PETERSON, WANDA		6.2 NAME	FRED PAGE 567 BISHOP GATE LN	
STREET ADDRESS	116 OSPREY RIDGE ROAD PONTE VEDRA BEACH FL				
14. I hereby c	ertify that the information supplied wit	h this filing does not qualify for t	6.4 CITY-ST-ZIP	TACKSONVILLE FL 32204 ted in Section 119 07(3)(i) Florida Statutes Lighther certify that the Information	<u></u>
14. I 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 of the recompetition of the competition of the competitio					
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 of on an attachment with an address.					