## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N95000002659 (9)

FIRST AMERICAN CULTURE & EDUCATION PRESERVATION ASSOCIATION, INC.

Principal Place of Business Mailing Address (correction) FIRST AMERICAN CULTURAL CENTER RT 5 BOX 7584 3. Date Incorporated or Qualified HWY 301 NORTH STARKE FL 22001 06/08/1995 STARKE FL 32091 4. FEI Number 59-3327210 2. Principal Place of Business 2a. Mailing Address 6. Certificate of Status Desired 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing 22 Trust Fund Contribution City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes [ Zip Country This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KNIGHT, RICHARD A DR. Street Address (P.O. Box Number Is Not Acceptable) 547 SE 58TH ST 83 **KEYSTONE HEIGHTS FL 32656** City 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

**FILED** Apr 08 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DELETE	1.1 TITLE	<b>1</b>	☐ Change	Addition
NAME	BERK, KAREN		1.2 NAME	chn's Felther 547 SE 58th Street		
STREET ADDRESS	6825 SW 65TH AVE		1.3 STREET ADDRESS	547 SE 38th Sheef		
CITY-ST-ZIP	OCALA FL		1.4 CITY-ST-ZIP	keystone Hts, FL 32656		
TITLE	D	DELETE	2.1 TITLE	D	Change	Addition
HAME	ROBERTSON, DARLA	•	2.2 NAME	Donna Holoka		
STREET ADDRESS	395 BEAR CREEK DR.		2.3 STREET ADDRESS	1341 woodruff Avenue		
CITY-ST-ZIP	BARTOW FL 33830		2. 4 CITY - ST - ZIP	Jacksonville, FL 32205		
TITLE	VST	DELETE	3.1 TITLE	D	Change	Addition Addition
NAME	COOPER, CATHERINE C		3.2 NAME	The Rev. William McCutchen		
STREET ADDRESS	9775 S.W. 52ND RD.		3.3 STREET ADDRESS	1109 SW 96th Street		
CITY-ST-ZIP	GAINESVILLE FL		3.4. CITY-ST-ZIP	Gainesville, FL 32604		
TITLE	A P	☐ DELETE	4.1 TITLE	D	Change	Addition
NAME	DAVIŠ MARGARET		4.2 NAME	Lee Mote Route 4 - BOX 2408		
STREET ADDRESS	7978 HAMMOND BLVD		4.3 STREET ADDRESS	Route 4 - BOX 2408		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP	Lake Butler, FL 32054		
TITLE	D	DELETE	5.1 TITLE		Change	Addition
NAME	SOWELL, GREG		5.2 NAME			
STREET ADDRESS	5402 WATERSIDE DR		5.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY-ST-ZIP			
TITLE	P	DELETE	6.1 TITLE		Change	Addition
NAME	ALLEN, CLIFFORD		6.2 NAME			
STREET ADDRESS	3211 SW 42ND ST		6.3 STREET ADDRESS			
	OCALA EL					

6.4 CITY-ST-ZIP

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 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.

Catherine C. Cooper Catherine C. Cooper