FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N95000002952 (8)

BRANFORD'S RIVER REUNION COMMITTEE, INC.

Principal Place of Business

Mailing Address

FILED May 14 1997 8:00am Secretary of State



BRANFORD FL		BRANFORD FL 32008-9350						
					3. Date Incorporated or Qualified 06/19/1995		te of Last 05/17/ 1	
2. Principal Pi	ace of Business 9th Rd.	2a. Mailing Address	79t	LRS.	4. FEI Number			Applied For
1 4/0	16 11 1001		17-		59-2922160		اسو ا	Not Applicabl
Suite, Apt. #		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		28 Branford	FL		Election Campaign Financing Trust Fund Contribution			May Be
320			Country	MILLINE		Yes 🗔	No _	r s. 199.032,
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	glatered A	igent	
			81	Name				
SCOTT,			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)		
	vannee avenue		<u> </u>		<u>'</u>	<u> </u>		
BRANFO	RD FL 32008		83					
			64	City			85 Zi	ip Code
				O.C.		FL		p 0000
office or re agent. I an	egistered agent, or both, in the State on familiar with, and accept the obligat	f Fforida. Such change was authons of, Section 617.0503, Florid	orized by a Statutes	the corpora	poration submits this statement for the patients board of directors. I hereby acce	of the appo	sintment a	as registered
	Signature, typed or printed name of registered agont			nt signature requ	irad when reinslating)	DATE		
2.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D OF DESTRICT	☐ DELETE	1.1 TITLE	ال ا	Bernardo, Gilbert J 17846 744 Rd Branfierd, FL 32008	,	Change	e L Additio
NAME	BERBARDO, GILBERT J.		1.2 NAME		noul 29# Rd			
STREET ADDRESS	ROUTE 3 BOX 98		1.3 STREET	ADDRESS /	5 1 El 22000	,		
ITY-ST-ZIP	BRANFORD FL 32008		1.4 CITY - S	I-ZIP	Branting 1 = 32018			
TITLE	T/D	☐ DELETE	2.1 TITLE				☐ Change	e 🔲 Additio
NAME	MCMULLEN, L.L. JR.		2.2 NAME					
STREET ADDRESS	PO BOX 918 (CORNER CARTE	R & MARTIN)	2.3 STREET	ADDRESS				
CITY-ST-ZIP	BRANFORD FL 32008		2. 4 CITY - 9	T-ZIP				
TITLE	D	DELETE	3.1 TITLE	1			Change	e 🔲 Additio
IAME	SAPP, LURA		3.2 NAME					
STREET ADDRESS	ROUTE 3 BOX 120		33 STREET	ADDRESS				
CITY-ST-ZIP	BRANFORD FL 32008		3.4. CITY - S	1 - 2 IP				
TITLE	D	☐ DELETE	4.1 TITLE				Change	e 🔲 Additio
IAME	GRIFFITH, R.G.		4. 2 NAME	l				
STREET ADDRESS	PO BOX 212 N/A		4.3 STREET	ADDRESS				
ATY-ST-ZIP	BRANFORD FL 32008		4.4 CITY - S	1-2IP				
ITLE	D	DELETE	5.1 TITLE				Change	e 🔲 Additii
AME	GAYLORD, DEAN		52 NAME	Ì				
TREET ADDRESS	PO BOX 547 N/A		5.9 STREET	ADDRESS				
CITY-ST-ZIP	BRANFORD FL 32008		5.4 CITY - S					
TILE		DELETE	6.1 TITLE				Chang	e 🔲 Additi
iame .		-	6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
-								
CITY-ST-ZIP	ar earlify that the information symplical	in this files was not souliful.	6.4 CITY - S		ed in Section 119 07/3/(i) Florida Statute	a I di athan		nd the

I do nereby 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 eath; 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.