

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000003984 (0)

1. Corporation Name

S.T.O.P.P. LEGAL DEFENSE FUND, INC.

Principal Place of Business 1599 FARM ROAD SEBRING FL 33810	Mailing Address C/O BISHOP JORDAN 245 QUAYSIDE CIR MAITLAND FL 32751
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2. Principal Place of Business 21 1599 FARM ROAD SEBRING FL 33810 22 SEBRING FL 33810 23 SEBRING FL 33810 24 33810	2a. Mailing Address 26 PO BOX 12279 27 Suite, Apt. #, etc. 28 FT PIERCE FL 29 34981 30 U.S.A.
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9. Name and Address of Current Registered Agent HADDEN, GENE 1599 FARM ROAD SEBRING FL 33810	10. Name and Address of New Registered Agent 81 Name NOLAN D ALLEN 82 Street Address (P.O. Box Number is Not Acceptable) 3958 OAK HAMMOCK LN 83 FT PIERCE 84 City FT PIERCE FL 85 Zip Code 34981
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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 NOLAN D ALLEN CHAIRMAN NOLAN D ALLEN 10-23-97
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 NAME STREET ADDRESS CITY-ST-ZIP	DV JORDAN, BISHOP 245 QUAYSIDE CIR. MAITLAND FL 32751	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DVS JORDAN BISHOP 245 QUAYSIDE CIR MAITLAND FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CROMMIE, MADELINE 245 QUAYSIDE CIR. MAITLAND FL 32751	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	400002339304-0 -11/05/97-01093-006 ****236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HADDEN, GENE 1599 FARM ROAD SEBRING FL 33810	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	PD HADDEN GENE 1599 FARM ROAD SEBRING FL 33810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STOSSEL, ROBERT JR. 7407 S. BLVD. WEST PALM BEACH FL 33413	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	TD STOSSEL ROBERT JR 14241 77 PLACE N LOXAHATCHEE FL 33470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ALLEN, BUDDY 3958 OAK HAMMOCK LANE FT. PIERCE FL 34981	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	CD ALLEN NOLAN D 3958 OAK HAMMOCK LN FT PIERCE FL 34981
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 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 changed, or on an attachment with an address.

FILED

97 NOV -3 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



97 11/3

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/21/1995	3a. Date of Last Report 08/19/1996
4. FEI Number 59-3332503	Applied For Not Applicable
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

CR2E037 (4/97)