NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9600000581

1. Corporation Name

PANHANDLE LAND CONSERVANCY, INC.

Principal Place of Business

Mailing Address

## **FILED** Feb 24, 1999 8:00 am § Secretary of State

02-24-1999 90028 041 \*\*\*\*61.25

106258 - 90028 - 41 8 \*

36468 EMERAL SUITE 2201 DESTIN FL 325	D COAST PKWY 541	36468 EMERALD COAST PKV SUITE 2201 DESTIN FL 32541	ΥY					
— ·	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 01/19/1996		<del></del>	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		· <del>-</del> -	4. FEI Number 59-3360986		· · · ·	lied For Applicable
City & State	<del>)</del>	City & State			Certificate of Status Desired		\$8.75 Ac	ditional
23   Zip	Country	Zip	Counti	у	6. Election Campaign Financing		\$5.00 N	May Be
24	25 29		30		Trust Fund Contribution  10. Name and Address of New F	Jacintarad /	Added to	Fees
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New F	registereu A	(gent	
			Ľ	Stev	en K. Hall			
HALL, STE					dress (P.O. Box Number is Not Accept			
	PORT ROAD		90		8 Emerald Coast P	arkwa	<del>y</del>	
SUITE 106			L	Suit	e 2201			
Destin Fi	L 32541		8	1 .		FL	85 Zip C	
14 D					In	numose of	hanging its r	egistered
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								
	Signature, typed or printed name of registered agent a			ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE	DIDECTOR	29 IN 12
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition:
TITLE	DP	☐ DELETE	1.1 TITLE	1			Containge	
NAME	HALL, STEVEN K		1.2 NAME	- 1				
STREET ADDRESS	36468 EMERALD COAST PKWY			ET ADORESS ]				
CITY-ST-ZIP	DESTIN FL 32541		1.4 CITY-				Change	Addition
TITLE	SD	☐ DELETE 2.1 TII					Change	
NAME {	DENTZAU, MIKE		2.2 NAME					
STREET ADDRESS	8350 HUNTER'S RIDGE TRAIL			ET ADDRESS	•			-
CITY-ST-ZIP	TALLAHASSEE FL 32312	☐ DELETE	2. 4 CITY	<del></del>			Change	Addition
TITLE	D CHEDDY C		3.1 TITLE					
NAME	HALL, SHERRY G		3.2 NAME					
STREET ADDRESS				ETADORESS				1
CITY-ST-ZIP	DESTIN FL 32541	☐ DELETE	3.4. CITY 4.1 TITLE				Change	Addition
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NAME				ET ADORESS				
STREET ADDRESS			4.3 S F RE	" i				1
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
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STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
NAME			6.2 NAMI	.				
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY	ST-ZIP				

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, with all other like empowered.

SIGNATURE: