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FILED
Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000002204 (3)**
1. Corporation Name
COASTAL PLAINS CHAPTER, INC.



Principal Place of Business 500 BAYFRONT PKWY. PENSACOLA FL 32520-0328	Mailing Address 500 BAYFRONT PKWY. PENSACOLA FL 32520-0328 US
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3. Date Incorporated or Qualified
04/23/1996

4. FEI Number
59-3308127

Applied For	Not Applicable
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2. Principal Place of Business 21 3814 Tiger Point Suite, Apt. #, etc.	2a. Mailing Address 26 3814 Tiger Point Suite, Apt. #, etc.
22 City & State Gulf Breeze, FL	27 City & State Gulf Breeze, FL
24 Zip 32561	25 Country US
28 Zip 32561	29 Country US

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**WATERS, G. DWAIN
500 BAYFRONT PKWY.
PENSACOLA FL 32520-0328**

10. Name and Address of New Registered Agent

81 Name WATERS, G. DWAIN
82 Street Address (P.O. Box Number is Not Acceptable) 3814 Tiger Point
83
84 City Gulf Breeze
85 Zip Code FL 32561

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 **G. Dwain Waters** *G. Dwain Waters* **4/21/98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SHARP, STEVEN F 8780 ELY RD PENSACOLA FL	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARNOLD, CYNTHIA 600 S. BARRACKS ST., STE. 102 PENSACOLA FL	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WATERS, DWAIN G 500 BAYFRONT PARKWAY PENSACOLA FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SALMON, CAROLYN W 180 GOVERNMENTAL CETNER, STE. 701 PENSACOLA FL	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, DENNIS M 3520 WEST PLYMPTON RD LAUREL HILL FL	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, RONDA J M.D. 3101 INTERNATIONAL DRIVE, EAST MOBILE AL	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Chairman Arnold, Cynthia 600 S. Barracks St. STE 102 Pensacola, FL 32501	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Vice-Chairman Meade, John D. 11 E. Olive Road Pensacola, FL 32514	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Treasurer Waters, G. Dwain 3814 Tiger Point Gulf Breeze, FL 32561	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Secretary Rodgers, Vicki 345 Anchors St. Ft. Walton Beach, FL 32584	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Director O'Connell, Ed 8205 Scenic Highway, App. D. Pensacola, FL 32514	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *G. Dwain Waters* **G. DWAIN WATERS** **4/21/98** **(850)444-6527**

CR2E037 (10/97)