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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # N9600005310

1. Corporation Name

BUCK LAKE ALLIANCE, INC.

Principal Place of Busine
P.O. BOX 15996
TALLAHASSEE FL 32317
i ne

## Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90002 006 \*\*\*\*61.25

Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Size   Size	Principal Place of Business Mailing Address									4		
22. Principal Place of Business   2a. Mailing Address   3. Date Incorporated or Qualified   10/16/1996   10/1	P.O. BOX 15996			P.O. BOX 15996				i I I I I I I I I I I I I I I I I I I I		1 <b>1   1   1   1   1   1</b>		
22. Principal Place of Business   2a. Mailing Address   3. Data Incorporated or Qualified   10/16/1996     25. Suite, Apt. #, etc.   5. Suite, Apt. #, etc.   4. Fel Number   S973411994     26. City & State   City & State   5. Certificate of Status Desired   58.75 Additional   For Required   5973411994     26. Country   Zip   Country   5. Certificate of Status Desired   58.75 Additional   For Required   5973411994     27. Country   Zip   Country   6. Election Campaign Financing   55.00 May 86   For Required   5973411994     28. State   5. Certificate of Status Desired   58.75 Additional   For Required   5973411994     29. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name   10. Name   10. Name and Address of New Registered Agent   10. Name   10.		FL 32317										
10/16/1996   10/16/1996   28   28   30   30/16/1996   1	US		U	5				* 10011101 010 01111 00111				
10/16/1996   10/16/1996   28   10/16/1996												
10/16/1996   10/16/1996   28   10/16/1996	2 Dringing O	age of Rucinoss	2a.	Mailing Address				3. Date Incorporated or Qualifed				
Sure, Apr. #, etc.    Suite, Apr. #, etc.   Suite, Apr. #, etc.   27	_	ace of business	$\vdash$	Maining Address							1	
Sp-3411946	Suite Ant # etc			<del>                                     </del>				4. FEI Number Applied For				
City & State  State Country  State C	<del>-</del>			<b>├</b>				59-3411946		Not	Applicable	
See Required   See Country   Zip   Country   See   Selection Carroologn Financing   See								E Cartifactor of Status Designed				
Zip Country Zip Country			28	•				5. Certificate of Status Desired		Fee Red	uired	
3. Name and Address of Current Registered Agent  TOMASELLO. 10M WATKINS, TOMASELLO & CALEEN, P.A. 1316 E LAFAYETTE ST SUITE B TALLAHASSEE FL 32301  17. Pursuant to the provisions of Sections 617,0002 and 617,1508. Profise Statutes, the above named concretion submits this statement for the purpose of changing its registered office or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent, or both. In the State of Fronton Submits and or registered agent ag		Country		Zip	Country	/		6. Election Campaign Financing	$\Box$	•	• •	
TOMASELLO, TOM WATKINS, TOMASELLO & CALEEN, P.A. 1316 E LAFAYETTE ST SUITE B TALLAHASSEE FI. 32301  17. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-arrand corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-arrand corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-arrand corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-arrand corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the appointment as registered agent agent in sections of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, agent agent in remained or purpose in the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with and accept the appointment are registered agent. I am familiar with and accept the appointment are registered ag	24	25	29		<u> </u>		_				Fees	
TOMASELLO, TOM  WATKINS, TOMASELLO & CALEEN, P.A.  1316 E LAFAYETTE ST SUITE B  TALLAHASSEE FI. 32301  17. 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 agent, and marrial with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and marrialize with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and marrialize with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and marrialize with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and marrialize with a corporation's board of directors. I hereby accept the appointment as registered agent, and a statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and a statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and a statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and a statutes.    12		9. Name and Address of Current	Regis	tered Agent				10. Name and Address of New F	Registered A	gent		
WATKINS, TOMASELLO & CALERN, P.A.  1316 E LAFAYETTE ST SUITE B  TALLAHASSEE FI. 32301  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  48 City  FL 85 Zip Code  48 City  FL 85 Zip Code  49 City  FL 85 Zip Code  40 City  FL 85 Zip Code  41 City  FL 85 Zip Code  41 City  FL 85 Zip Code  42 City  FL 85 Zip Code  43 City  FL 85 Zip Code  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  73 Code  73 Code  73 Code  73 Code  73 Code  74 Code  75 Code  76 Code  77 Code  78 Code  78 Code  78 Code  78 Code  78 Code  78 Code					. 81	Na	ame					
WATKINS, TOMASELLO & CALERN, P.A.  1316 E LAFAYETTE ST SUITE B  TALLAHASSEE FI. 32301  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  48 City  FL 85 Zip Code  48 City  FL 85 Zip Code  49 City  FL 85 Zip Code  40 City  FL 85 Zip Code  41 City  FL 85 Zip Code  41 City  FL 85 Zip Code  42 City  FL 85 Zip Code  43 City  FL 85 Zip Code  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  73 Code  73 Code  73 Code  73 Code  73 Code  74 Code  75 Code  76 Code  77 Code  78 Code  78 Code  78 Code  78 Code  78 Code  78 Code	TOMASELLO, TOM			82 Street			reet Addres	ddress (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301  TALLAHASSEE FL 32301  TALLAHASSEE FL 32308  TOTYST-ZP  TALLAHASSEE FL 32308  TOTYST-ZP  TALLAHASSEE FL 32311  TOTYST-ZP  TALLAHASSEE FL 32311  TOTE	WATKINS,	TOMASELLO & CALEEN, P.A.			_	<u> </u>						
17. 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 and appeal and the infection of 17.0503, Florida Statutes.    SIGNATURE					83	1					1	
17. 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, Upped or provided name of registered agent and time of applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  OFFICERS AND DIRECTORS IN 12.  TITLE  SD. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  WILL, ROBIN.  STREET ADDRESS  TALLAHASSEE FL 32311  TITLE  TO DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TALLAHASSEE FL 32311  TALLAHASSEE FL 32311  DELETE  21 TITLE  TO DELETE  21 TITLE  TO DELETE  21 TITLE  TO DELETE  22 TIVE  23 TALLAHASSEE FL 32311  DELETE  33 TREET ADDRESS  TALLAHASSEE FL 32318  TALLAHASSEE FL 32311  DELETE  4.1 TITLE  TO DELETE  5.1 TITLE  TO DELETE  5.2 TALLAHASSEE FL 32311  TALLAHASSEE FL 32311  DELETE  5.3 TITLE  TO DELETE  5.4 TITLE  TO DELETE  5.5 TITLE  TO DELETE  5.5 TO DELETE  5.5 TITLE  TO DELETE  5.5 TO DELETE  5.5 TITLE  TO DELETE  5.5 TI	TALLAHAS	SEE FL 32301			84	i ci	itv			85 Zip C	ode	
Office or registered agent, or both, in the State of Florida. Such refrance was belighted to Section 617,0503, Florida State of Florida. Such refrance was made agent and time if applicable.  SIGNATURE  SIGNATU		·					•					
Agent. 1 am familiar with, and accept the obligations of, Section of MUSINS, Fidnes Statutes.  SIGNATURE    Signature   Signat	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered											
Signature, typed or printed team of registance dependents.   (NOTE Registance dependents)	agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
Signature, typed or printed team of registance dependents. (NOTE Registance dependents). (NOTE REGISTANCE). (NOTE CONTEST. (NOTE).	SIGNATURE											
THE SD WILL, ROBIN  TROUGH SKIPPER LN.  TO SKIPPER LN.  TALLAHASSEE FL 32311  THE PEANY, MYRTICE John O. Dew 22 Name  STREET ADDRESS OFT. ST. 2P  TALLAHASSEE FL 32311  THE PD DELETE 3.1 THE 5.7 TELLAH SCSC. FL 3.3 3.1  THE PD DELETE 3.1 THE 5.7 TELLAH SCSC. FL 3.3 3.1  THE PD DELETE 3.1 THE 5.7 TELLAH SCSC. FL 3.3 3.1  THE PD DELETE 3.1 THE 5.7 TELLAH SCSC. FL 3.3 3.1  THE PD DELETE 3.1 THE 5.7 TELLAH SCSC. FL 3.3 3.1  THE STREET ADDRESS OFT. ST. 2P  TALLAHASSEE FL 32311  THE STREET ADDRESS OFT. ST. 2P  TALLAHASSEE FL 32318  TALLAHASSEE FL 32308  TALLAHASSEE FL 32308  TALLAHASSEE FL 32311  THE STREET ADDRESS OFT. ST. 2P  TALLAHASSEE FL 32311  TALLAHASSEE FL 32311  TALLAHASSEE FL 32311  T	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere						eture required v	when reinstating)  ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12	
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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, with all other like empowered.

SIGNATURE: