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May 14 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 # **N96000006108 (2)**

1. Corporation Name

APPETITE FOR LIFE, INC.

Principal Place of Business

Mailing Address

**1842 W. CERVANTES ST.
PENSACOLA FL 32501**

**P O BOX 308
PENSACOLA FL 32592**



3. Date Incorporated or Qualified

11/20/1996

4. FEI Number

593415148

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LOUX, BARBARA
1842 W. CERVANTES ST.
PENSACOLA FL 32501**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **BAROCO, VICKIE**
STREET ADDRESS **242 SABINE DRIVE**
CITY-ST-ZIP **PENSACOLA BEACH FL 32561**

TITLE **PD** ☒ DELETE

NAME **YOUNG, KURT**
STREET ADDRESS **1760 E. BLOUNT STREET**
CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **D** ☐ DELETE

NAME **LOUX, BARBARA**
STREET ADDRESS **1815 E. JACKSON ST**
CITY-ST-ZIP **PENSACOLA FL 32501**

TITLE **D** ☒ DELETE

NAME **HARRELL, SUSAN**
STREET ADDRESS **2555 PARADISE POINT DR.**
CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **D** ☐ DELETE

NAME **COE, WICK**
STREET ADDRESS **1175 NORTON DR.**
CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **TD** ☐ DELETE

NAME **HILLYER, RAY**
STREET ADDRESS **1800 E. GONZALEZ ST**
CITY-ST-ZIP **PENSACOLA FL 32501**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **V D** ☒ Change ☐ Addition

1.2 NAME **BAROCO, VICKIE**
1.3 STREET ADDRESS **11826 LAKEVIEW AVE.**
1.4 CITY-ST-ZIP **PENSACOLA, FL. 32503**

2.1 TITLE **PD** ☐ Change ☒ Addition

2.2 NAME **DAVID RICHBOURG**
2.3 STREET ADDRESS **1404 EAST LAKEVIEW AVE.**
2.4 CITY-ST-ZIP **PENSACOLA, FLA. 32503**

3.1 TITLE **SD** ☒ Change ☐ Addition

3.2 NAME **LOUX, BARBARA**
3.3 STREET ADDRESS **1815 E. JACKSON ST.**
3.4 CITY-ST-ZIP **PENSACOLA, FL. 32501**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **TD** ☒ Change ☐ Addition

5.2 NAME **Coe, Wick**
5.3 STREET ADDRESS **1175 NORTON DR.**
5.4 CITY-ST-ZIP **PENSACOLA, FL. 32503**

6.1 TITLE **D** ☒ Change ☐ Addition

6.2 NAME **Hillyer, Ray**
6.3 STREET ADDRESS **1800 E. GONZALEZ ST.**
6.4 CITY-ST-ZIP **PENSACOLA, FL. 32501**

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:

David Richbourg

2/14/98

(850) 4136-8744

CR2E037 (10/97)