FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N9700000251 (5)

AVONDALE NEIGHBORHOOD WATCH ASSOCIATION, INC.										
Principal Place of Business		Mailing Address			I KOOTIFOK DID IN HI HODII QDIIN NOME	88111 88111 88	ANI 00119 17091			
5677 VENTURA PENSACOLA F		5677 VENTURA LANE PENSACOLA FL 32526		L	Date Incorporated or Qualified 01/13/1997					
					4	. FEI Number 59-344725.3			pplied For ot Applicable	
2. Principal P	lace of Business	2a. Mailing Address 26			5	. Certificate of Status Desired			Additional equired	
Sulte, Apt. #, etc.						. Election Campaign Financing		\$5.00	May Be	
22 27						Trust Fund Contribution Is this nonprofit corporation a h	l l	Added to		
23		28					Yes [No		
Zip 24	Country	Zip 3	Country	y	8	This corporation owes or has p	_		tangible ⊒ No	
24	25 25 Name and Address of Curre		101		10	Personal Property Tax due June Name and Address of New Re				
			81	Name						
FISHER, JACQUELYN D				Street	1 Address (P.O. Box Number is Not Accepta	hle)			
	NTURA LANE					, vo. box righton to rice viceopta				
PENSAC	OUA FL 32526		83							
		÷	84	City			FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corp office or registered agent, or both, in the State of Florida. Such change was authorized by the corporat agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						on submits this statement for the	purpose of	changing if	ts registered	
agent. la	m familiar with, and accept the oblig	gations of, Section 617.0503, Flori	da Statute	S.	iipoiations	board of directors, i flereby acce	thr mis app	Ontiment as	registere0	
SIGNATURE .						<u></u>				
12.	Signature, typed or printed name of registered ag	pent and trie if applicable (NOTE: § ND DIRECTORS	Registered Ag	eni signalure	re required who	en reinstating) ADDITIONS/CHANGES TO OFFI	DATE OF DO A NO	DIDECTOR	20.151.40	
TITLE	PD	DELETE DELETE	1.1 TITLE		PD	ADDITIONS/CHANGES TO OFFI	CEUS AINT	Change	Addition	
NAME	FISHER, JACQUELYN D		1.2 NAME		FISH	er, Jacquelyn D		an orango		
STREET ADDRESS	5677 VENTURA LANE			T ADDRESS	1567	er, Jacquelyn D 7 Ventura 10	me			
CITY-SY-ZIP	PENSACOLA FL 32526		1.4 CITY-			acola, F1. 325				
TITLE	VTD	☐ DELETE	2.1 TITLE		VD			Change	Addition	
NAME	MILUSZEWSKI, TOM		2.2 NAME		Gri	ffith, Clayon			l	
STREET ADDRESS	5661 VENTURA LANE		2.3 STREET ADDRESS		580	le Verriura la	ne-			
CITY-ST-ZIP	PENSACOLA FL 32526		2. 4 CITY-	ST-ZIP	Pen	sacola Florida		26		
TITLE	D	DELETE	3.1 TITLE		TD	$\overline{\nu}$		Change	Addition	
NAME	MILUSZEWSKI, NANCY		3.2 NAME			rge, Shirley				
STREET ADDRESS	5677 VENTURA LANE		3 3 STREET ADDRE		3 C C C		ne			
CITY-ST-ZIP	PENSACOLA FL 32526		3.4. CITY-	ST-ZIP	Ren:	<u>sacola, Fl. 325</u>	<u>524</u>			
TITLE	D OF A DATE OF A	☐ De lete	4.1 TITLE		20	· 1		Change	Addition	
NAME	GEORGE, SHIRLEY		4. 2 NAME		120 m	s, Rene'	<i>z</i> .			
STREET ADDRESS	5687 VENTURA LANE PENSACOLA FL 32526			ADDRESS	1264	9 ventura von	501	_	ļ	
CITY-ST-ZIP TITLE	\$D	☐ DELETE	4.4 CITY - S	ST-ZIP		sacola, Fl. 32	<u>ما در ح</u>	Change	Addition	
NAME	GOODSON, TINA	C) Official	5.1 TITLE 5.2 NAME		D	مالمه السماء		-A-custiling	T volution	
STREET ADDRESS	5780 WICKFORD LANE		5.3 STREET	(ADODECC		ridge, Hugh	- e			
CITY+ST-ZIP	PENSACOLA FL 32528		5.4 CITY - S			0 Vestavia Lar sacola. Fl. 328				
TITLE	D	☐ DELETE	6.1 TITLE	N T ZIF	D	Jacola, Fr. Jac	<u> </u>	Change	Addition	
NAME	SIMS, RENE		6.2 NAME			Lins, L.W.				
STREET ADDRESS	"5649 VENTURA LANE			ADDRESS	570	D Vestavia L	ane.			
CITY-ST-ZIP	PENSACOLA FL 32526		64 CITY-5		130,0	60 CO \ C E 3	2051	>10		

14. Thereby 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 Decomplying Like there will a Ficher Alville (850)4552173