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FILED
Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001293 (6)
1. Corporation Name
PRESERVE OUR ISLAND ASSOCIATION, INC.



Principal Place of Business: 101 ENTRADA TWO PENSACOLA BEACH FL 32561
Mailing Address: 101 ENTRADA TWO PENSACOLA BEACH FL 32561

3. Date Incorporated or Qualified: 03/03/1997
4. FEI Number: 59 344 1298
Applied For: Not Applicable
6. 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

2. Principal Place of Business: 21 900 Ft. Pickens Rd, Suite, Apt. #, etc. # 611, City & State: Pensacola FL, Zip: 32561, Country: USA
2a. Mailing Address: 26, Suite, Apt. #, etc.: 27, City & State: 28, Zip: 29, Country: 30

9. Name and Address of Current Registered Agent: DETORO, DONNA, 101 ENTRADA TWO, PENSACOLA BEACH FL 32561
10. Name and Address of New Registered Agent: 81 Name: Pat Ayres, 82 Street Address (P.O. Box Number is Not Acceptable): 900 Ft. Pickens Rd # 611, 83, 84 City: Pensacola Bch, FL, 85 Zip Code: 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: Patricia Ayres, Patricia Ayres, Feb 5, 1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DETORO, DONNA	
STREET ADDRESS	101 ENTRADA TWO	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SULZYCKI, JOHN	
STREET ADDRESS	900 FT. PICKENS ROAD, #1012	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	DR VP	<input type="checkbox"/> DELETE
NAME	AYRES, DON	
STREET ADDRESS	900 FT. PICKENS ROAD, #611	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	D - Sec. TREAS.	<input type="checkbox"/> DELETE
NAME	KUTINA, JEAN	
STREET ADDRESS	1299 FT. PICKENS ROAD, #35	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCHULER, CHARLIE	
STREET ADDRESS	901 PANFERIO DRIVE	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENLEY, JACK	
STREET ADDRESS	262 SABINE	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Pat Ayres	
1.3 STREET ADDRESS	900 Ft. Pickens Rd #611	
1.4 CITY-ST-ZIP	Pensacola Bch, FL 32561	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Jaskie wood	
2.3 STREET ADDRESS	168 Mirabell Cir	
2.4 CITY-ST-ZIP	Pensacola, FL 32514	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: Patricia Ayres, Patricia Ayres Feb 5th, 98

CR2E037 (10/97)