

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90507 037 ****61.25

DOCUMENT # N97000001456 1. Entity Name FLORIDA'S FRESHWATER FRONTIER, INC.			
Principal Place of Business 5813 OLIVE ROAD SEBRING, FL 33875-6041		Mailing Address POST OFFICE BOX 1196 SEBRING, FL 33781-1196	
2. Principal Place of Business 2730 US Hwy 27 N Suite, Apt. #, etc.		3. Mailing Address PO BOX 1196 Suite, Apt. #, etc.	
City & State Sebring, FL Zip 33870		City & State Sebring FL Zip 33871-1196	
Country USA		Country USA	
4. FEI Number 65-0768427		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEALE, BETTY J 5813 OLIVE ROAD SEBRING, FL 33875-6041		7. Name and Address of New Registered Agent Name Topel, Lynn A Street Address (P.O. Box Number is Not Acceptable) 112 Karola Dr City Sebring	
State FL		Zip Code 33870	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Lynn A Topel <small>Signature, typed or printed name of registered agent and title if applicable.</small>		Lynn A Topel <small>(NOTE: Registered Agent signature required when reinstating)</small>	
DATE 4-19-04			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE SD NAME JACKSON, ANDREW B STREET ADDRESS 150 N COMMERCE AVENUE CITY-ST-ZIP SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE CD NAME JONES, K S "BUTCH" STREET ADDRESS GLADES CO COURTHOUSE HWY 27 & 5TH ST CITY-ST-ZIP MOORE HAVEN, FL 33471	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VCD NAME MARKHAM, LOWREY STREET ADDRESS 401 SO PARROTT AVE. CITY-ST-ZIP OKEECHOBEE, FL, FL 34974	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TREASURER Gentry, Doris M 650 E Cornell St Avon Park, FL 33825	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME SMITH, BOBBY R STREET ADDRESS BCC-412 W ORANGE STREET-RM A-203 CITY-ST-ZIP WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME NEADS, RON STREET ADDRESS 201 EAST OAK STREET, STE 201 CITY-ST-ZIP ARACADIA, FL 34266	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VCD NEADS, RONALD 201 East Oak Street, STE 201 ARACADIA, FL 34266	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME MECHLIN, JEFFREY STREET ADDRESS 98 NORTH FORREST AVE CITY-ST-ZIP AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: [Signature] <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4/19/04	
Daytime Phone #			