

AMENDED FILE NOW: FILING FEE IS \$61.25

REPORT NONPROFIT CORPORATION ANNUAL REPORT 1998

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



FILED
Jun 25 1998 8:00am
Secretary of State

DOCUMENT # N97000001488 (2)

1. Corporation Name

FUTURE CHOICES, INCORPORATED

Principal Place of Business

608 E 6TH CT
PANAMA CITY FL 32401

Mailing Address

608 E 6TH CT
PANAMA CITY FL 32401

3. Date Incorporated or Qualified

03/12/1997

4. FEI Number

59-3442521

Applied For

Not Applicable

2. Principal Place of Business

21 810 Grace Avenue

Suite, Apt. #, etc.

22 City & State

23 Panama City, FL

Zip Country

24 32401

25 Bay

2a. Mailing Address

26 810 Grace Avenue

Suite, Apt. #, etc.

27 City & State

28 Panama City, FL

Zip Country

29 32401

30 Bay

5. 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

9. Name and Address of Current Registered Agent

WILLIAMS, PATTI L
608 E 6TH CT
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name

Patti L. Williams

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

2404 W. Beach Drive

83

84 City

Panama City

FL

85 Zip Code

32402

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE D
NAME WILLIAMS, PATTI L
STREET ADDRESS 4002 MILANO RD
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE D
NAME BARNES, MARY H
STREET ADDRESS 814 NEW YORK AVE
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE D
NAME WORLEY, VIRGINIA M
STREET ADDRESS 306 CARDIFF CT
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE D
NAME CLARK, JULIE A
STREET ADDRESS 2106 ALAMO ST
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE D
NAME BOWEN, IRENE H
STREET ADDRESS 3910 WAVE AVE
CITY-ST-ZIP SPRINGFIELD FL 32404

TITLE D
NAME THOMAS, MICHAEL L
STREET ADDRESS 304 CARDIFF CT
CITY-ST-ZIP PANAMA CITY FL 32404

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE D
1.2 NAME Williams, Patti L.
1.3 STREET ADDRESS 2404 W. Beach Dr.
1.4 CITY-ST-ZIP Panama City, FL 32402

2.1 TITLE D
2.2 NAME Dubuisson, Paula J.
2.3 STREET ADDRESS 1405 W. Beach Dr.
2.4 CITY-ST-ZIP Panama City, FL 32401

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE S/T
4.2 NAME Clark, Julie A.
4.3 STREET ADDRESS 2106 Alamo St.
4.4 CITY-ST-ZIP Panama City, FL 32405

5.1 TITLE D
5.2 NAME Rankin, Sherry
5.3 STREET ADDRESS 208 East Central Ave.
5.4 CITY-ST-ZIP Blountstown, FL 32424

6.1 TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/98

Date

(850) 769-5532 EXT 23

Daytime Phone # 850-769-5532

CR2E037 (10/97)

DONALD J. BANKS
ATTORNEY AND COUNSELOR AT LAW
434 MAGNOLIA AVENUE
PANAMA CITY, FLORIDA 32401

REPLY TO
POST OFFICE BOX 430
PANAMA CITY, FL 32402

TELEPHONE
(850) 769-5532
FACSIMILE
(850) 769-7126

June 10, 1998

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

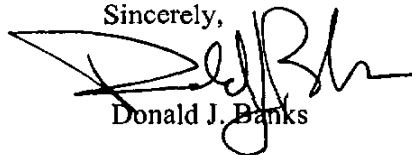
Re: Nonprofit Corporation Annual Report
Future Choices, Inc. #N97000001488

Dear Sir or Madam:

I recently filed the annual report for the above referenced corporation and a director's name was inadvertently left off the list of additions. I spoke with someone in your office and they instructed me to file an amended report which is enclosed herewith. Also enclosed is the filing fee for the amended report in the amount of \$70.00. Please send the Certificate of Status to the above address.

If you should have any questions, please do not hesitate to contact me.

Sincerely,



Donald J. Banks

DJB:cb
Enclosure