SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9700003929 (3)

THE INTERNATIONAL ORDER OF ST. VINCENT, INC.					
Principal Plac	e of Business	Mailing Address		T I REDIKTOL DED LIBER I BODIO BODIO BODIO BODIO BRIDE (III)	10 (0/10 4/04D 104) 18 DI
5940-9TH AVE. S. GULFPORT FL 33707		5910-9TH AVE. S. GULFPORT FL 33707		Date Incorporated or Qualified 07/07/1997 4. FEI Number	Applied For
				59-3461249	Not Applicable
2. Principal Place of Business		2a. Malling Address 26		1 3. Continuate of Status Desired 1_1 .	3.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.00 May Be dded to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners assu	
23		28		☐ Yes ☒ No	
Zip	Country	Zip	Country	This corporation owes or has paid the current y Personal Property Tax due June 30.	
24	9. Name and Address of Current		10 T	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agen	
Gd Stores					5 φ,
BINGHAM, SUSAN H			82 Street A	Address (P.O. Box Number is Not Acceptable)	
11740 CURRIE LANE LARGO FL 33774			83	ite 701	
				Colors 85	
84 City St. Petersburg FL 85 Zip Code 33 70) 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 tamiliar with, and accept the obligations of, section 617.0503, Florida Statutes.					
LEGISTRE SUSAN H. Biraham Luan H. Bricham 7-8-98					
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered Agent signature		2507000 11110
12. 1(TLE	OFFICERS AND	DELETE	13. 1,1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIF	hange Addition
NAME	-	[] DELETE	1.2 NAME	Bruce Potter Bingham	unude 🔽 vocinou
STREET ADDRESS			1.3 STREET ADDRESS	5940 - 9th Ave. 5,	
CITY-ST-ZIP	<u> </u>		1.4 CITY-ST-ZIP	Gulfport FL 33707	
TITLE		DELETE	2.1 TITLE		hange 🔀 Addition
NAME			2.2 NAME	Linda Buckley	
STREET ADDRESS			2.3 STREET ADDRESS	11372 - 118th Place No	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Largo FL 33778	
TITLE		DELETE	3.1 TIFLE		hange 🔀 Addition
NAME			3.2 NAME	Anthony J. Clark 2304 Linda Lane	
STREET ADDRESS	. ·		3.3 STREET ADDRESS	- · · . · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP TITLE			3.4 CITY-ST-ZIP		. 52
NAME		DELETE	4.2 NAME	D/T Doub Smith	hange 💹 Addition
STREET ADDRESS			4.3 STREET ADDRESS	Charles Joseph Smith 1413 S. Howard Ave., Svite	202
CITY-ST-ZIP	=		4.4 CITY-ST-ZIP	Tampa FL 33606	_
TITLE		DELETE	5.1 TITLE		hange 🔀 Addition
NAME		☐ DELETE	5.2 NAME	Susan Helms Bingham 5940 - 9th Ave. S.	liguide 52 vocition
STREET ADDRESS			5.3 STREET ADDRESS	5940 - 9+ Ave. 5.	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Gulfport FL 33707	
TITLE	:	DELETE	6.1 TITLE		hange Addition
NAME			6.2 NAME		
STREET ADDRESS	<i>:</i>		6.3 STREET ADDRESS		
1			- 1		

14. I hereby certify that the information supplied with this filling 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 ceth; 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 chapted, or on an attachment with an address.

Bingham Susan H. Bingham

FILED

Jul 22 1998 8:00am 8

Secretary of State