

FILE NOW: FILING FEE IS \$61.25

APPROVED
AND
FILED

99 FEB 19 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000005149

1. Corporation Name

NORTHEAST FLORIDA PRESERVATION, INC.

Principal Place of Business

**48 KING STREET
ST. AUGUSTINE FL 32085**

Mailing Address

**P.O. BOX 4168
ST. AUGUSTINE FL 32085**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		09/09/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		☒ Applied For ☐ Not Applicable	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip			
24		29		30	
Country		Country			

9. Name and Address of Current Registered Agent

**KEYS, LESLEE
48 KING STREET
ST. AUGUSTINE FL 32085**

32084

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

32084

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

Leslee J. Keys
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

25 Jan 1999

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
☐ DELETE	Chairman	E.L. Roy Hunt	P.O. Box 117643	☐ Change ☒ Addition	Chairman - C	E.L. Roy Hunt	P.O. Box 117643
	Vice Chairman	Dana Ste. Claire	1640 Museum Blvd.	☐ Change ☒ Addition	Vice Chairman - V	Dana Ste. Claire	1640 Museum Blvd.
	Director	Nancy Sikes Kline	15 Mirvela Ave.	☐ Change ☒ Addition	Director - D	Nancy Sikes Kline	15 Mirvela Ave.
	Director	Sandra Dunnavant	P.O. Box 627	☐ Change ☒ Addition	Director - D	Sandra Dunnavant	P.O. Box 627
	Director	Al Hadeed	1200 E. Moody Blvd., #11	☐ Change ☒ Addition	Director - D	Al Hadeed	1200 E. Moody Blvd., #11
	Director	Susan Little	1863 Ocean Village Dr.	☐ Change ☒ Addition	Director - D	Susan Little	1863 Ocean Village Dr.
	Director	Amelia Island	FL 32034	☐ Change ☒ Addition	Director - D	Amelia Island	FL 32034

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-99

Date

Daytime Phone #

0001622

CR2E037 (11/98)

DEPPJT2 - 01 RUN DATE 02/05/1999 AS OF 02/05/1999
SARAS - CENTRAL ACCOUNTING

POSTED JOURNAL TRANSACTIONS BY SWDM WITHIN INITIATING OLO AND SITE

Handwritten: 2/8/99

AUDIT LOCATION - STATEWIDE
OLO 450000 - DEPARTMENT OF STATE
SITE 00 - DEPARTMENT OF STATE
SWDM D9008476849 ADOENO V003835

Handwritten: LF

FEB 19 '99 11:19AM BUREAU OF FIN MGT

P.1

RECEIVED

19 FEB -8 AM 7:53

BUREAU OF
PLANNING BUDGET AND
FISCAL SERVICES

ACCOUNT CODE				CF	TC	OBJECT	AMOUNT				ACCOUNT CODE				CF	TC	OBJECT
----- BENEFITTING DATA -----																	
45	20	2	130001	45300000	00	000100	00	45	20	2	130001	45300000	00	000100	00	45	
INVOICE # 98005149																	

61.25)

61.25 45

TRANSACTION CODE TOTAL - 25

61.25 45