

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90026 021 ****61.25

DOCUMENT # N99000001477		
1. Entity Name APALACHICOLA BAY AND RIVER KEEPER, INC.		

Principal Place of Business 23 AVENUE D APALACHICOLA, FL 32320	Mailing Address 23 AVENUE D APALACHICOLA, FL 32320
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01182008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-3550426	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
TONSMEIRE, DANIEL L 23 AVENUE D APALACHICOLA, FL 32320	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P TAYLOR, CHAD 4226 BUCKLAND TRAIL GREENWOOD, FL 32443 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Taylor, Chad 4226 Buckland Trail Greenwood FL 32443 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P FARR, GRAYAL 3315 READING LANE TALLAHASSEE, FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Estes, Joyce PO Box 585 East point, FL 32328 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T MORAN, CHRIS 1918 VINELAND LANE TALLAHASSEE, FL 32311 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ilardi, Jeff 30 Hammock Cove Rd East point, FL 32328 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S MILLER, NANCY C P.O. BOX 16278 TALLAHASSEE, FL 32317 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lyett, Jim PO Box 874 Carrabelle FL 32322 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, ADAMS 1440 ELM COURT ST. GEORGE ISLAND, FL 32328 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D McCartney, Patti 2105 Blue Heron Trail St. George Island FL 32328 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHLEY, DON P.O. BOX 430 SOPCHOPPY, FL 32358 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P Ashley, Don PO Box 430 Sopchoppy FL 32358 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 1/24/08 850-653-8936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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ATTACHMENT

page 2

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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 59-3550426			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent TONSMEIRE, DANIEL L 23 AVENUE D APALACHICOLA, FL 32320				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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 NAME STREET ADDRESS CITY-ST-ZIP	D/P TAYLOR, CHAD 4226 BUCKLAND TRAIL GREENWOOD, FL 32443	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Middlemas, John 718 Bunkers Cove Rd Panama City, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FARR, GRAYAL 3315 READING LANE TALLAHASSEE, FL 32312	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paban, Brett 233 3rd ST, N St. Petersburg FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T MORAN, CHRIS 1918 VINELAND LANE TALLAHASSEE, FL 32311	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richey, Joseph 2926 Park ST Marianna, FL 32446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S MILLER, NANCY C P.O. BOX 16278 TALLAHASSEE, FL 32317	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SIGNATURE: _____			Date 11/21/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone # 850-653-8936		