

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90124 014 ****61.25

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DOCUMENT # N99000001477

1. Entity Name
APALACHICOLA BAY AND RIVER KEEPER, INC.



Principal Place of Business
**29 ISLAND DR
STE 6
EASTPOINT FL 32328**

Mailing Address
**PO BOX 484
EASTPOINT FL 32328**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **59-3550426**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MCLAIN, DAVID
29 ISLAND DRIVE SUITE 6
EASTPOINT FL 32328**

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

FILE NOW: FEE IS \$61.25

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

TITLE	DVP	<input type="checkbox"/> Delete
NAME	HALL, BRUCE	
STREET ADDRESS	238 ATLANTIC AVE	
CITY-ST-ZIP	APALACHICOLA FL 32320	
TITLE	D	<input type="checkbox"/> Delete
NAME	MARSOLAN, ERNEST	
STREET ADDRESS	102 LAS BRISAS WAY	
CITY-ST-ZIP	ST. GEORGE ISLAND FL 32328	
TITLE	DT	<input type="checkbox"/> Delete
NAME	MORAN, CHRIS	
STREET ADDRESS	1918 VINELAND LANE	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	D	<input type="checkbox"/> Delete
NAME	ADAMS, TOM	
STREET ADDRESS	1440 ELM CT.	
CITY-ST-ZIP	ST. GEORGE ISLAND FL 32328	
TITLE	D	<input type="checkbox"/> Delete
NAME	SUMMER, LLOYD	
STREET ADDRESS	632 E PINE ST	
CITY-ST-ZIP	ST. GEORGE ISLAND FL 32328	
TITLE	D	<input type="checkbox"/> Delete
NAME	MIDDLEMAX, JOHN R	
STREET ADDRESS	718 DUNKERS COVE ROAD	
CITY-ST-ZIP	PANAMA CITY FL 32401	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Chadwick Taylor	
STREET ADDRESS	4226 Buckland Trail	
CITY-ST-ZIP	GREENWOOD, FL 32443	
TITLE	D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Penny Pennington	
STREET ADDRESS	5812 Old Federal Road	
CITY-ST-ZIP	QUINCY, FL 32351	
TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Andrew Jubal Smith	
STREET ADDRESS	12542 WATERFRONT DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL 32312	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLARD VINSON	
STREET ADDRESS	239 Smith Street	
CITY-ST-ZIP	EASTPOINT, FL 32328	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce Platt	
STREET ADDRESS	5412 Lawton Court	
CITY-ST-ZIP	TALLAHASSEE, FL 32317	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kevin McGorty	
STREET ADDRESS	13093 Henry Beale Drive	
CITY-ST-ZIP	TALLAHASSEE, FL 32312	

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: BRUCE PLATT, President 4/4/03 850-670-5470

CR2E037 (10/02)

Attachment

90072837
#N99000001477

Apalachicola Bay & River Keeper, Inc. Additional Directors

Title Director
Name Johnny Williams
Street Address 3136 Oscar Harvey Road
City-ST-ZIP Tallahassee, FL 32310

Title Director
Name Kristin Anderson
Street Address 341 Smith Road
City-ST-ZIP Apalachicola, FL 32320

Title Director
Name Lari Murry
Street Address 1424 Elm Court
City-ST-ZIP St. George Island, FL 32328