

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003381

FILED  
Jul 11, 2005  
Secretary of State

**Entity Name:** HELP SAVE THE APALACHICOLA RIVER GROUP, INC.

**Current Principal Place of Business:**

4812 COUNTY RD. 381  
WEWAHITCHKA, FL 32465

**New Principal Place of Business:**

**Current Mailing Address:**

4812 COUNTY RD. 381  
WEWAHITCHKA, FL 32465

**New Mailing Address:**

**FEI Number:** 59-3640729      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BLACKWELL, MARILYN  
4812 COUNTY RD. 381  
WEWAHITCHKA, FL 32465      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DVP      ( ) Delete  
Name: TAUNTON, DANIEL  
Address: PO BOX 870  
City-St-Zip: WEWAHITCHKA, FL 32465

Title: DP      ( ) Delete  
Name: BLACKWELL, MARILYN  
Address: 4812 COUNTY RD 381  
City-St-Zip: WEWAHITCHKA, FL 32465

Title: DS      ( ) Delete  
Name: BRYANT, RUTH  
Address: 1645 COUNTY RD. 381  
City-St-Zip: WEWAHITCHKA, FL 32465

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL TAUNTON

DVP

07/11/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date