

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **681007** (1)

1. Corporation Name  
**THE FIRST NATIONAL MARKETING GROUP OF FLORIDA, INC.**



Principal Place of Business Mailing Address  
**C/O JOHN B DA GROSA SR  
76 YACHT CLUB PL  
TEQUESTA FL 33469-1948**

3. Date Incorporated or Qualified <b>08/05/1980</b>	3a. Date of Last Report <b>02/07/1995</b>
4. FEI Number <b>59-2019616</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	30. Country

**9. Name and Address of Current Registered Agent**

**DA GROSA, JOHN B SR  
76 YACHT CLUB PL.  
TEQUESTA FL 33469-1948**

**10. Name and Address of New Registered Agent**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature of the principal officer or registered agent and the incorporator. (Indicate Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DST</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DA GROSA, THERESA KULESZ</b>	1.2 NAME	
STREET ADDRESS	<b>76 YACHT CLUB PLACE</b>	1.3 STREET ADDRESS	
CITY-STATE-ZIP	<b>TEQUESTA, FL 00000</b>	1.4 CITY-STATE-ZIP	
TITLE	<b>DP</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DA GROSA, JOHN B, SR</b>	2.2 NAME	
STREET ADDRESS	<b>76 YACHT CLUB PLACE</b>	2.3 STREET ADDRESS	
CITY-STATE-ZIP	<b>TEQUESTA, FL 00000</b>	2.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied in this filing is true and correct. I am not qualified for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this report is true and correct 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 trust; and that I am authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of this report.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature and Title of Registered Agent or Director

CR2E034 (12/95)

1-17-96 (407) 914-0112