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Mar 11 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710183 (5)

1. Corporation Name

GEM AND MINERAL SOCIETY OF THE PALM BEACHES, IN
C.

Principal Place of Business

Mailing Address

4801 DREHER TRAIL NORTH
P.O. BOX 3041
WEST PALM BEACH FL 334024801 DREHER TRAIL NORTH
P.O. BOX 3041
WEST PALM BEACH FL 33402-30413. Date Incorporated or Qualified
01/10/19663a. Date of Last Report
03/08/1996

4. FEI Number

59-6196330

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

2. Principal Place of Business

21 P.O. Box 18095

Suite, Apt. #, etc.

22 City & State

23 West Palm Beach FL

Zip

24 33416

Country

25 USA

2a. Mailing Address

26 P.O. Box 18095

Suite, Apt. #, etc.

27 City & State

28 West Palm Beach FL

Zip

29 33416

Country

30 USA

9. Name and Address of Current Registered Agent

MAUSS, TED
345 CAVALIER RD
PALM SPRINGS, FL
33461

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 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ☒ DELETENAME MUSA, YAHIA
STREET ADDRESS 1218-D SHIBUMY CIRCLE
CITY-ST-ZIP WEST PALM BEACH FLTITLE D ☒ DELETENAME SHONKWILER, HAROLD
STREET ADDRESS 1620 OSBORNE CIRCLE
CITY-ST-ZIP LAKE WORTH FLTITLE PD ☐ DELETENAME CHENOWETH, DONALD S
STREET ADDRESS 6364 BIRCH LANE
CITY-ST-ZIP LANTANA FLTITLE VD ☐ DELETENAME JULIANO, ANGELA
STREET ADDRESS 9870-B ORCHID TREE TRL
CITY-ST-ZIP BOYNTON BEACH FLTITLE SD ☐ DELETENAME SHONKWILER, NANCY
STREET ADDRESS 1620 OSBORNE CIRCLE
CITY-ST-ZIP LAKE WORTH FLTITLE TD ☐ DELETENAME URSILLO, LINDA M
STREET ADDRESS 1240 NW 22ND AVENUE
CITY-ST-ZIP DELRAY BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☐ Change ☒ Addition1.2 NAME MARY ANN STAMPER
1.3 STREET ADDRESS 3716 S. 57TH ST.
1.4 CITY-ST-ZIP GREEN ACRES, FL 334632.1 TITLE D ☐ Change ☒ Addition2.2 NAME EDWARD CHELM
2.3 STREET ADDRESS GOLFS EDGE #1-F
2.4 CITY-ST-ZIP WEST PALM BEACH, FL 334173.1 TITLE D ☒ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE PD ☒ Change ☐ Addition4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Linda M Ursillo LINDA M. URSILLO

2/28/97

561-272-2325

CR2E037 (9/96)