

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 717184 (6)

1. Corporation Name

SUNSHINE CITY CHAPTER NO. 9, INCORPORATED



Principal Place of Business

Mailing Address

4801 37TH ST. N
ST. PETERSBURG FL 33714-2911

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ST. PETERSBURG FL 33714-2911

3. Date Incorporated or Qualified: 09/16/1969
3a. Date of Last Report: 01/30/1995

21	2. Principal Place of Business	2a	2a. Mailing Address	4.	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-6196567	Not Applicable
22	22	27	27	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State		City & State		<input checked="" type="checkbox"/>	
23	23	28	28	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Zip		Zip		<input type="checkbox"/>	
24	24	25	25	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Country		Country			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KING, LAWRENCE M.
4801 37TH ST N
ST PETERSBURG FL 33714

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: LAWRENCE M. KING Comdr/Pres *Lawrence M. King* DATE: _____
Signature, typed or printed name of registered agent, and title, if applicable. (NOTE: Registered Agent's signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, LAWRENCE M.	1.2 NAME	
STREET ADDRESS	4801 - 37TH ST., N.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33714	1.4 CITY-ST-ZIP	VD
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUBE, JOSEPH L.,	2.2 NAME	
STREET ADDRESS	4801 37TH ST N	2.3 STREET ADDRESS	CANNON, ROBERT M., SR
CITY-ST-ZIP	ST PETERSBURG FL	2.4 CITY-ST-ZIP	4801 37th Street N St Petersburg, FL 33714
TITLE	TD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOUGHARD, PERCY J.,	3.2 NAME	
STREET ADDRESS	4801 37TH ST. N.	3.3 STREET ADDRESS	BOUGHARD, PERCY J.
CITY-ST-ZIP	ST PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATSON, ALEXANDER B.	4.2 NAME	
STREET ADDRESS	4801 37TH ST N	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: LAWRENCE M. KING *Lawrence M. King* DATE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)