FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF \$TATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

722158

(3)

GOAL INCORPORATED

Principal Place of Business		Mailing Address		I (481)1 19818 11881 11881 11881 81181 3	911 MIDII MIDII MIDII DIBII DIBII MIBII II	•
	E. 11TH AVENUE HAMI FL 33161	14040 N.E. 11TH AVER NORTH MIAMI FL 3310	- T			
				3. Date Incorporated or Qualified 11/24/1971	3a. Date of Last Report 02/01/1995	
	al Place of Business	2a. Mailing Address	, , ,	4. FEI Number 59-1369385	Applied For	
21		26		29-1309303	Not Applica	
22	pl. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additiona	ıl
City & S	State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to rees	
24	25	29	30		Yes No	
·k	9. Name and Address of Curren			10. Name and Address of New Re	gistered Agent	
			81 Name			
WINT	ers, John F.		B2 Street Add	ress (P.O. Box Number is Not Acceptable	9)	
14040) N.E. 11TH AVENUE				·	
Nort	TH MIAMI FL 33161-3302		83			
			84 City		85 Zip Code	
],		FL [s]	
11. Pursua	ant to the provisions of Sections 617.0502 istered agent, or both, in the State of Florid	and 617.1508, Florida Statu	tes, the above named corpo	ration submits this statement for the purp	ose of changing its registered o	office
familiai	r with, and accept the obligations of, Secti	on 617.0503, Florida Statute	S.	and or directors. Thereby accept the appoint	innont as registered agent. I ar	
SIGNATUR	RE					
10	Signature, typed or printed name of registered agent		OTE: Registered Agent signature require		DATE OF THE AND DIDE CLODE IN 19	
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Additi	ΔΠ
NAME	HINTERKOPF, ERNEST C.		1.2 NAME			J.,
STREET ADDRE	AAAAA NE AATU ASENDE		1.3 STREET ADDRESS			
CITY - ST - ZIP	NORTH MIAMI FL 33161-3302		1.4 CITY-ST-ZIP			
TI'LE	VD	DELETE	2 1 TITLE		☐ Change ☐ Additi	on
NAME	DATE, PAUL L.		2.2 NAME			
STREET ADDRE	ss 14040 N.E. 11TH AVENUE		2 3 STREET ADDRESS			
CHTY - ST - ZIP	NORTH MIAMI FL 33161-3302	!	2 4 CITY-ST-ZIP			
TITLE	SD	☐ DELETE	31 TITLE		☐ Change ☐ Additi	ол
NAME	GALBRAITH, JOIE		3 2 NAME			
STREET ADDRE			3 3 STREET ADORESS			
CITY-ST-ZIP	NORTH MIAMI FL	Docum	3 4 CITY-ST-ZIP			
TITLE	BALCH, RICHARD	DELETE	4 1 TITLE 4 2 NAME		Change Additi	(II)
NAME STREET ADORE	AADAD ALE AATH AMENINE		4.2 NAME 4.3 STREET ADDRESS			
CITY - ST - ZIP	NORTH MIAMI FL 33161-3302	•				
TITLE	TOTAL TERMINATE SOLOT GOOD	DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		Change Additi	ion .
NAME			5.2 NAME			
STREET ADORE	rss		5 3 STREET ADDRESS			
City-St-ZiP			5.4 CiTY - ST - ZIP			
TIFLE		DELETE	61 TITLE		☐ Change ☐ Add-ti	ion
NAME			6.2 NAME			
STREET ADORE	ess		6.3 STREET ADDRESS			
CITY-ST-ZIP			6 4 CITY - ST - ZIP			
	ereby certify that the information supplied that the information indicated on this annu-					
oath; t	that I am an officer or director of the corpors in Block 12 or Block 13 if changed, or c	ration or the receiver or trust	ee empowered to execute th			

SIGNATURE: Emest C. Hinterhopf
SIGNATURE AND TYPED OR PRINTED NAME OF SUNING OFFICER OR DIRECTOR