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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Change

Change

Change

Addition

Addition

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME ! 171 N ATLANTIC AVE #25

COCOA BEACH FL

WISEMAN, FRED

20 YAWL DRIVE

COCOA BEACH FL

(0)

Mailing Address

NORTH TRITON ARMS, INC.

171 N. ATLANTIC AVE 171 N. ATLANTIC AVE **COCOA BEACH FL 32931** COCOA BEACH FL 32931-2989 3. Date Incorporated or Qualified 3a. Date of Last Report 02/09/1972 02/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1447782 200 N FIRST Jr-26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be BEACH OCUA Added to Fees 28 Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 3293 Yes X No 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LAURASO MORRIS MCWHORTER, CATHERINE Street Address (P.O. Box Number is Not Acceptable) 82 171 N. ATLANTIC AVE., #38 83 COCOA BEACH FL 32931 DEACH 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. MORRIS 4-19-97 6MMS SIGNATUR (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition TD NAME 1.2 NAME MCWHORTER, WILLIAM STREET ADDRESS 171 N. ATLANTIC AVE, #38 1.3 STREET ADDRESS CITY-ST-ZIP COCOA BCH FL 1.4 City-St-ZiP Change DELETE Addition TITLE 2.1 TITLE NAME NEUBAUER, RUDOLPH 2,2 NAME STREET ADDRESS 171 N. ATLANTIC AVE, #37 2.3 STREET ADDRESS COCOA BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITI F 3.1 TITLE Change Addition NAME **NOVAK, ANDREW** 3.2 NAME

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.

3.3 STREET ADDRESS

4,3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5,4 CITY - S1 - ZIP

4,4 CITY-ST-ZIP

3.4. CITY - ST- ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE