FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 17, 1999 8:00 am
Secretary of State
05-17-1999 90039 017 ****70.00

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DOCUMENT #

1. Corporation Name
THE FORE-PLEX ASSOCIATION, INC.

Principal Place of Business / Mailing Address
2295 LOWSON BLVD.
DELRAY BEACH, FLORIDA 33445

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21	26	4/10/1972
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1803809 ☐ Applied For ☑ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required
Zip 24 — Country 25	Zip 29 — Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent
ALAN THIEMANN
2505A LOWSON BLVD.
DELRAY BEACH, FLORIDA 33445

10. Name and Address of New Registered Agent
81 Name GARY T. WARD
82 Street Address (P.O. Box Number is Not Acceptable) 2403A LOWSON BOULEVARD
83
84 City DELRAY BEACH FL 85 Zip Code 33445

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 Gary T. Ward GARY T. WARD 4/29/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT ALAN THIEMANN 2505-A LOWSON BLVD. DELRAY BEACH, FL. 33445	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT GARY T. WARD 2403-A LOWSON BLVD. DELRAY BEACH FL. 33445	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-PRESIDENT VINCENT JACOBUCCI 2405-C LOWSON BLVD. DELRAY BEACH FL. 33445	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VICE-PRESIDENT RICHARD DOYLE 2415-B LOWSON BLVD. DELRAY BEACH, FL. 33445	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER / DIRECTOR KAREN SCHELL 2505-D LOWSON BLVD. DELRAY BEACH FL. 33445	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	DIRECTOR JACK TOLLEY 2415-D LOWSON BLVD. DELRAY BEACH FL. 33445	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER / SECRETARY MYRA TASHMAN 2525-D LOWSON BLVD. DELRAY BEACH, FL. 33445	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ARTHUR GODDU 2405-B LOWSON BLVD. DELRAY BEACH, FL. 33445	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. I 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, with all other like empowered.

SIGNATURE: Gary T. Ward GARY T. WARD 4/29/99 561-276-0541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #