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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 734838 (6)
1. Corporation Name
THE MARINERS CLUB ASSOCIATION, INC.

Principal Place of Business Mailing Address
20750 SOUTHWEST 84TH AVENUE MIAMI FL 33189 **20750 SOUTHWEST 84TH AVENUE MIAMI FL 33189**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/22/1976** 3a. Date of Last Report **04/20/1994**
4. FEI Number **59-2421563** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **Same** 25 **Same**
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FIESELMAN, CHARLOTTE A
20758 S.W. 84TH AVE.
MIAMI FL 33189

81 Name **Same**
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE **N/A** **Charlotte A. Fieselman, President**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	FIESELMAN, CHARLOTTE A 20758 SW 84TH AVE. MIAMI FL 33189	1.1 TITLE Same	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD	EDWARDS, BRAD 8414 SOUTHWEST 208 STREET MIAMI FL 33189	2.1 TITLE Same	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE STD	NELLISSSEN, DON 20750 SOUTHWEST 84TH AVE. MIAMI FL 33189	3.1 TITLE Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	BARRETO, FIDEL P 8418 SOUTHWEST 208 ST. MIAMI FL 33189	4.1 TITLE Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	PRANO, FRANK N 20752 SOUTHWEST 84TH AVE. MIAMI FL 33139	5.1 TITLE Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charlotte A. Fieselman* (305) 379-0755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Office Phone #
Charlotte A. Fieselman, President