FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **767666** **(1)**

1. Corporate Name

MARITIME COLLEGE ALUMNI ASSOCIATION FLORIDA CENT ENNIAL CHAPTER, INC.

Principal Place of Business	Mailing Address
% STANLEY LLOYD 7545 S.E. AUTUMN LANE HOBE SOUND FL 33455	% STANLEY LLOYD 7545 S.E. AUTUMN LANE HOBE SOUND FL 33455

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/25/1983
3a. Date of Last Report: 06/23/1994
4. FEI Number: 59-1281848 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 % STEPHEN J. KING	26 % STEPHEN J. KING
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 1520 BRAE MOOR LANE	27 1520 BRAE MOOR LANE
City & State	City & State
23 DUNEDIN, FLORIDA	28 DUNEDIN, FLORIDA
Zip / Country	Zip / Country
24 34698 / 25 USA	29 34698 / 30 USA

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TOSCANO, ROCCO 801 S. OCEAN DR. STE. #208 FT. PIERCE FL 34949	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 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: (Signature of new registered agent) (Name of Registered Agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PD ☑ Change ☐ Addition
NAME	LLOYD, STANLEY	12 NAME	KING, STEPHEN J.
STREET ADDRESS	7545 S.E. AUTUMN LANE	13 STREET ADDRESS	1520 BRAE MOOR LANE
CITY ST ZIP	HOBE SOUND FL 33455	14 CITY ST ZIP	DUNEDIN, FL. 34698
TITLE	VD	21 TITLE	VD ☑ Change ☐ Addition
NAME	KING, STEPHEN J	22 NAME	GARVEY, DARRELL D.
STREET ADDRESS	1520 BRAE MOOR LANE	23 STREET ADDRESS	501 SHERBORN COURT
CITY ST ZIP	DUNEDIN FL 33528	24 CITY ST ZIP	ORLANDO, FL 32828
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	GONZALES, JOHN R	32 NAME	
STREET ADDRESS	2345 LAKE AVE.	33 STREET ADDRESS	
CITY ST ZIP	MIAMI BEACH FL 33141	34 CITY ST ZIP	
TITLE	STD	41 TITLE	STD ☑ Change ☐ Addition
NAME	TOSCANO, ROCCO	42 NAME	VALENTINE, ROBERT
STREET ADDRESS	801 S. OCEAN DR., #208	43 STREET ADDRESS	2211 BLUE TERN DR.
CITY ST ZIP	FT. PIERCE FL 34949	44 CITY ST ZIP	PALM HARBOR, FL. 34683
TITLE	D	51 TITLE	D ☑ Change ☐ Addition
NAME	DAMM, THEODORE	52 NAME	HEYEN, GEORGE
STREET ADDRESS	9083 KENTISH CT.	53 STREET ADDRESS	11475 98 AVE. N.
CITY ST ZIP	JACKSONVILLE FL	54 CITY ST ZIP	MADEIRA BEACH, FL. 33708
TITLE	D	61 TITLE	D ☑ Change ☐ Addition
NAME	VALENTINE, ROBT.	62 NAME	TOSCANO, ROCCO
STREET ADDRESS	2211 BLUE TERN DR	63 STREET ADDRESS	801 S. OCEAN DR. # 208
CITY ST ZIP	PALM HARBOR FL	64 CITY ST ZIP	FT. PIERCE, FL 34949

14. I do hereby certify that the information supplied with this filing is validly furnished and 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.

SIGNATURE: R. Toscano R. TOSCANO 4/25/95 (401) 465-3530 x 3005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0050000