

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # F94000003871 (0)

1. Corporation Name
AFSMI FOUNDATION, INC.



Principal Place of Business: 1342 COLONIAL BLVD SUITE 25 FT MYERS FL 33907
Mailing Address: 1342 COLONIAL BLVD SUITE 25 FT MYERS FL 33907

3. Date Incorporated or Qualified: 07/25/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0453189
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent: TRPIK, JOSEPH 1342 COLONIAL BLVD SUITE 25 FT MYERS FL 33907
10. Name and Address of New Registered Agent: 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 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: CP NAME: HARRELL, RUSSELL STREET ADDRESS: 2708 BRITTANY LANE CITY-ST-ZIP: GARPEVINE TX 76051	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: S NAME: CAGAN, DENNIS STREET ADDRESS: 2220 SO BEVERLY GLEN, SUITE 308 CITY-ST-ZIP: LOS ANGELES CA 90064-2456	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: T NAME: BOLETTIERI, GEORGE STREET ADDRESS: 11668 WINDCREST LANE CITY-ST-ZIP: SAN DIEGO CA 82128	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: COWIE, JAMES STREET ADDRESS: 70 HIGGINBOTHAM RD CITY-ST-ZIP: BYDE NSW 2112 AUSTRALIA	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 40000180417 -05/02/96--01012--004 ***61.25
TITLE: D NAME: GOMMERS, MAART STREET ADDRESS: P.O. BOX 10000 N/A CITY-ST-ZIP: NL-5680 DA BEST NETHERLANDS	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: ROCKS, FRANK STREET ADDRESS: 6800 N MCCORMICK BLVD CITY-ST-ZIP: CHICAGO IL 60645-2709	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph Trpik Joseph Trpik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 4/25/96 Daytime Phone #: 9412757887

CR2E037 (12/95)

5-1-96
JR