

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N00594** (4)

1. Corporation Name

THE FIRST FLORIDA CHAPTER OF THE MILITARY VEHICLE PRESERVATION ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2232 SMILEY AVE
WINTER PARK FL 32792

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WINTER PARK FL 32792

3. Date Incorporated or Qualified
12/27/1983

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2362278

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

**ARNOLD H. STEFFNY
3901 14TH ST NE
ST. PETERSBURG FL 33703**

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3 **900001857979**

B4 City **06/11/96-01073-017** Zip Code **FL 85**

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

Arnold H. Steffny

(NOTE: Registered Agent signature required when reinstating)

4-25-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **PDD ARNOLD H. STEFFNY**
STREET ADDRESS **3901 14TH ST NE**
CITY-ST-ZIP **ST PETERSBURG FL**

1.1 TITLE Change Addition
1.2 NAME **PDD ARNOLD H. STEFFNY**
1.3 STREET ADDRESS **3901 14TH ST NE**
1.4 CITY-ST-ZIP **ST. PETERSBURG FL 33703**

TITLE DELETE
NAME **VD STEWARD, STEPHAN**
STREET ADDRESS **6031 ARDELE CT.**
CITY-ST-ZIP **APOPKA FL**

2.1 TITLE Change Addition
2.2 NAME **VD MIKE SCHOLER**
2.3 STREET ADDRESS **6509 BRANDON CIR**
2.4 CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE DELETE
NAME **TD BYERS, ALAN T.**
STREET ADDRESS **734 TIMOR AVE**
CITY-ST-ZIP **ORLANDO FL**

3.1 TITLE Change Addition
3.2 NAME **TD BYERS, ALAN T**
3.3 STREET ADDRESS **734 TIMOR AVE**
3.4 CITY-ST-ZIP **ORLANDO, FL 32804-1745**

TITLE DELETE
NAME **ED PERKINS, FRED**
STREET ADDRESS **5220 S.W. 109TH AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

4.1 TITLE Change Addition
4.2 NAME **ED MELINDA STEFFNY**
4.3 STREET ADDRESS **3901 14TH ST. NE**
4.4 CITY-ST-ZIP **ST PETERSBURG FL 33703**

TITLE DELETE
NAME **SD MACKENZIE, RICHARD**
STREET ADDRESS **3053 BAY TREE DRIVE**
CITY-ST-ZIP **ORLANDO FL**

5.1 TITLE Change Addition
5.2 NAME **SD BLITZ GREIG**
5.3 STREET ADDRESS **9019 PARK BLVD #101**
5.4 CITY-ST-ZIP **SEMINOLE FL 34647**

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Alan Byers **ALAN BYERS**

4-22-1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

6-10-96

(407) 628-5634