FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name N25396

(5)

	NIS AKTION CLUB OF INC		C.		
Principal Place of Business *SAMUEL A. BLOCK 2127 10TH AVENUE VERO BEACH FL 32860		Mailing Address *SAMUEL A. BLOCK 2127 10TH AVENUE			5111 CAN STON STON STON STON STON
VEHO BEAU	SH FL 32960	VERO BEACH FL 32980		3. Date Incorporated or Qualified	3a. Date of Last Report
				03/14/1988	03/24/1995
<u></u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0133215	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	~	S. Flavian Commission	Fee Hequired
23		28		Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24 -	25	29	30] Yes ☐ No
***************************************	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
	BLOCK, SAMUEL A.			dress (P.O. Box Number is Not Acceptable	9)
2127 10TH AVENUE					
VERO BEACH FL 32960			63		
			84 City		85 Zip Code
11 Dura cont	to the groupings of Costings 617 Of	500 and 047 4500 Findin Dut An			
l or registe	reo agent, or both, in the State of Fr	iorioa. Such change was authorized	s, the above-named corpo d by the corporation's bo	oration submits this statement for the purp ard of directors. I hereby accept the appoi	ose of changing its registered office introduced introd
SIGNATURE	ith, and accept the obligations of, S	action 617,0503, Florida Statutes,			
SIGNATORIE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOT)	E: Registered Agent signature requir	ed when reinstating)	DATE
12.	T	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12
TITLE	S	DELETE	1.1 TITLE		Change Addition
NAME	DESENA, DIANE		1.2 NAME		
STREET ADDRESS	2677 12TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	JONES, MARLENE		2.2 NAME		
STREET ADDRESS	1040 66TH AVE		2.3 STREET ADDRESS		
CiTY-ST-ZIP	VERO BEACH FL	P***	2.4 CITY-ST-ZIP		
TITLE	P	DELETE	3.1 TITLE		Change Addition
NAME	REPLOGLE, JOHN		3.2 NAME		
STREET ADDRESS	1386-16TH AVENUE		3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VERO BEACH FL	DELETE	3 4. CITY-ST-ZIP		F=1
		Morrelle	4.1 TITLE		Change Addition
NAME	WELLS, LLOYD		4. 2 NAME		
STREET ADDRESS	1386 16TH AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VERO BEACH FL	DELETE	4.4 CITY - ST - ZIP	80000183 -05/23/960100	5898
NAME	VP SHAW, VERNEL	Florrett	5.1 TITLE	-05/23/960100	7044 Change Addition
STREET ADDRESS	1865 40TH AVE		5.2 NAME	***61.25	
	VERO BEACH FL		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D DEACH FL	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME	SCHOLZE, CINDY	Finerers	6.2 NAME		Change Addition
STREET ADDRESS		:	6.3 STREET ADORESS		5-22-96

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.

6.4 CITY-ST-ZIP

SIGNATURE: _

VERO BEACH FL

CITY-ST-ZIP

BRONATURE AND TYPED OR PRINTED NIME OF EGNING OFFICER OR DIRECTOR
Diane Desena. Secretary

CR2E037 (12/95)