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Jan 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N37300 (3)

1. Corporation Name
FIRST COAST MANUFACTURERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
8421 BAYMEADOWS WAY. SUITE 2 JACKSONVILLE FL 32256
8421 BAYMEADOWS WAY. SUITE 2 JACKSONVILLE FL 32256-8223

3. Date Incorporated or Qualified 03/22/1990
3a. Date of Last Report 03/08/1996

2. Principal Place of Business 2a. Mailing Address
21 7775 Baymeadows Way 26 7775 Baymeadows Way
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 Suite 106 27 Suite 106
City & State City & State
23 Jacksonville, FL 28 Jacksonville, FL
Zip Country Zip Country
24 32256 25 32256 29 32256 30

4. FEI Number 59-2922415 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
DANIELS, L. A., JR.
8421 BAYMEADOWS WAY,
SUITE 2
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
7775 Baymeadows Way
83 Suite 106
84 City Jacksonville FL 85 Zip Code 32256

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

Table with 6 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes names like HALL, Y. E. J, BAGGETT, JOHN, DUNCAN, DOUG, WILCHEK, JOHN, ROSE, ALRRY E, JONES, HOMAS P JR.

Table with 6 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes checkboxes for Change and Addition.

14. I do hereby certify that the information supplied with this filing 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: _____ Date 1-15-97 (904) 731-2280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Daniel L. Daniels, Jr., Pres. Daytime Phone # 0000003

CR2E037 (9/96)