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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N3730

(3)

FIRST COAST MANUFACTURERS ASSOCIATION, INC.

FILED Jan 16 1998 8:00am Secretary of State

7775 BAYMEADOWS WAY 7775 BAYMEADOWS WAY STE 106 JACKSONVILLE FL 32256 US 2. Principal Place of Business 21 Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Date Incorporated or Qualified 03/22/1990 4. FEI Number Sp-2922415 Not Applied For Not Applied For Not Applied For Source Required 5. Certificate of Status Desired Fee Required	Principal Place of Business Mailing Address						
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MACKSONWILE FL 92256 JACKSONWILE FL 92256		DOWS WAY				· ·	
Special Place of Business 2a, Mailing Address 59-2922415 Not Applicable Special Country 2a Sulfe, Apt. #, etc. Sulfe		E FL 32256	*				
Suite, Apt. 6, etc. Suite, Ap	US US					represent	
City & State City	⊢ '	Place of Business	<u> </u>				
City & State		. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
20	22		27			Trust Fund Contribution Added to Fees	
20		te					
Section Sect	23	Country					
DANIELS, L. A., JR. 7775 BAYMEADOWS WAY STE 106 JACKSONVILLE FL 32256 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purvisors of changing is registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purvisors of changing is registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes. 12.	 				,		
DANIELS, L. A., JR. 7775 BAYMEADOWS WAY STE 106 JACKSONVILLE FL 32256 11. Pursuant to the provisions of Sections 617 1502 and 617 1502, Paridas Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Floridas Statutes, the above-named 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, Floridas Statutes. SIGNATURE Date	24						
STEET ADDRESS ST	5. Name and Address of Odner Registered Agent				Name	IV. Hamo and Address of New Hogisteres Agent	
STEET ADDRESS ST	DANIEL	SIABO					
STE 108 JACKSONVILLE FL 32256 84 City	I a contract the contract of t		إ		Street A	ddress (P.O. Box Number is Not Acceptable)	
JACKSONVILLE FL 32256 84 City FL 85 Zip Code				83			
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 general. I have been agent and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I have been agent and the state of Florida. Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITYST-2IP 15. STREET ADDRESS CITYST-2IP 16. Citange 17. STATE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. Change 19. Change 19. Citange 19. C	1						
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Signature, typed or printed harms of registered agent and table it applicables. (NOTE: Registered Agent signature resulted when reinstating) DATE							
TILE D	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) DATE						
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			this filling does not qualify for t			in Section 119 07(3)(i) Florida Statutes 1 further certify that the information	

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 empewered 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:

L.A. Daniels, Jr., President 1/6/98 (904)731-2280

CR2E037 (10/97)