FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N47899

(2)

THE FLORIDA CHAPTER OF THE MARKETING RESEARCH AS SOCIATION, INC.

Principal Place of Business

Mailing Address

1734 KINGSLEY AVE. ORNAGE PARK FL 32073

SIGNATURE:

1734 KINGSLEY AVE. ORANGE PARK FL 32073-4438 FILED Feb 07 1997 8:00am Secretary of State



US		US				
					te of Last Report 05/01/1996	
9 Dringing Di	ace of Business	2a. Mailing Address		4. FEI Number		
		. ⊢ . ĭ ~ 14	C7 15 11-	59-3116150	Applied For Not Applicable	
21 4020 Suite, Apt. #	South 57 th Ave	26 4020 South Suite, Apt. #, etc.	3/ /10		\$8.75 Additional	
22 Suite 103 27 Suite 103			5. Certificate of Status Desired	Fee Required		
City & State City & State City & State LAKE Worth, F1 28 LAKE Worth, F1			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zíp	Country	Zip	Country	8. This corporation has liability for intangible	tax under s. 199.032,	
24 33463 25 USA 29 33463 30 USA				Florida Statutes Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name and Address of New Registered Agent						
OIS STERMED						
				dress (P.O. Box Number is Not Acceptable)	ss (P.O. Box Number is Not Acceptable)	
1734 KINGSLEY AVE. 4020 South 57 th Ave						
ORANGE PARK FL 32073 83 54: 10.3						
RAI City RSI Zin Coda						
Lake horeth FL 33463						
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 Signature lyped or printed frame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	Signature Typed or printed frame of registered ager OFFICERS AND		: Registered Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TIFLE	PD	DELETE			\$260 D 1 (19)	
NAME	CLAPP, DANIEL	—	1.2 NAME	VATHENN BLOCK BURN	,	
STREET ADDRESS 760 NW 107TH AVE., STE 106/115			1.3 STREET ADDRESS	KATHRYN Blackburn 9250 BAY Meadows Rd STE 350		
CITY-ST-ZIP	MAIMI FL	,	1.4 CITY-ST-ZIP	Jackson ville, Fl 322.56		
TITLE	PD	DELETE	2.1 TITLE	ID	Change Addition	
NAME	NOLAN, BARBARA	<i>7</i> *	2.2 NAME	Daniel Clapp		
STREET ADDRESS	218 JACKSON ST.		2.3 STREET ADDRESS	Daniel Clapp 760 NW 107 to Ave Stell	06/115	
CITY - ST - ZIP	MAITLAND FL		2.4 CITY-ST-ZIP	Miami, Fl	-	
TITLE	VD	☐ DELETE	3.1 TITLE	VI)	Change Addition	
NAME	BLACKBURN, KATHRYN		3.2 NAME	suzanne Cattell		
STREET ADDRESS	9250 BAYMEADOWS RD., STE	. 350	3 3 STREET ADDRESS	500 NORTH ORLANDO AVE	# 1318	
CITY-ST-ZIP	JACKSONVILLE FL 32256		3.4. CITY-ST-ZIP	WINTER PARK, E1 3278	7	
TITLE	VD	DELETE	4.1 TITLE	10	Change	
NAME	Bethart, Marta		4. 2 NAME	OIS STERMEN AND SKE	103	
STREET ADDRESS	9100 CORAL WAY STE 6		4.3 STREET ADDRESS	4020 3.3.	110	
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST - ZIP	Lake worth Pl 334		
TITLE	SD	☐ DELETE	5.1 TITLE	3/D	Change Addition	
NAME	STERMER, LOIS		5.2 NAME	Scott Baker	~4	
STREET ADDRESS	4020 S. 57TH AVE., STE 103		5.3 STREET ADDRESS	600 N. West shore BIVE	27E30/	
CITY-ST-ZIP	LAKE WORTH FL		5.4 CITY - ST - ZIP	TAMPA F1 3 3607		
TOTLE	TD	DELETE	6.1 TITLE	V/D	Change Addition	
NAME	BROWN, JEANNETTE		6.2 NAME	Doug Conwell 202 South Packer St.		
STREET ADDRESS	2653 SANDLEWOOD CIR		6.3 STREET ADDRESS	XUX SOUTH PARKER -1	ļ	
CITY-ST-ZIP	ORANGE PARK FL 32065		6.4 CITY-ST-ZIP	TAMPA, F. 33606		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 115.07(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.						
appears in pioce, 12 or pioce, 13 inchanged, or or an autominion with an address.						