

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90129 016 ***150.00

DOCUMENT # V39356

1. Corporation Name

NORTH PERRY CHAPTER OF THE FLORIDA AERO CLUB, IN
C.



Principal Place of Business

2134 HOLLYWOOD BLVD
HOLLYWOOD FL 33020
US

Mailing Address

2134 HOLLYWOOD BLVD
HOLLYWOOD FL 33020
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/26/1992

4. FEI Number

65-0410129

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip Country

24

25

2a. Mailing Address

26
Suite, Apt. #, etc.

27
City & State

28
Zip Country

29

30

9. Name and Address of Current Registered Agent

LAW OFFICE OF RAY A. SCHLICHTE JR. P.A.
2134 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	HIGGINS, DAVID W	
STREET ADDRESS	1411 SW 87TH TERRACE	
CITY-ST-ZIP	PEMBROKE PINES FL	
TITLE	DV	☒ DELETE
NAME	DOLIN, MIKE	
STREET ADDRESS	11118 DELTA CIRCLE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	DS	☒ DELETE
NAME	HIGGINS, VICKY	
STREET ADDRESS	1411 SW 87TH TERRACE	
CITY-ST-ZIP	PEMBROKE PINES FL	
TITLE	DT	☐ DELETE
NAME	AUMICK, CHARLES	
STREET ADDRESS	446 NE 210 CIRCLE TERRACE #202	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Barch Eric PRES	☒ Change ☐ Addition
1.2 NAME	Barch Eric	
1.3 STREET ADDRESS	2611 Thomas ST	
1.4 CITY-ST-ZIP	Hollywood FL 33020	
2.1 TITLE	Reiskin Herb VP	☒ Change ☐ Addition
2.2 NAME	Reiskin Herb	
2.3 STREET ADDRESS	1528 Rodman ST	
2.4 CITY-ST-ZIP	Hollywood FL 33020	
3.1 TITLE	Hodes Cheryl SEC	☒ Change ☐ Addition
3.2 NAME	Hodes Cheryl	
3.3 STREET ADDRESS	1528 Rodman ST	
3.4 CITY-ST-ZIP	Hollywood FL 33020	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

013706