## **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 # 1. Corporation Name

728578

(6)

THE CLINTON ASSOCIATION, INC.

				, , , , , , , , , , , , , , , , , , , ,	
Principal Place of Business Mailing Address			)	(844 01016 04011 04016 84011 01 <del>8</del> 44 01011 7004	
6545 INDIAN CREEK DRIVE MIAMI BEACH FL 33141		6545 INDIAN CREEK DRIVE MIAMI BEACH FL 33141-5831			
				3. Date Incorporated or Qualified 01/08/1974	3a. Date of Last Report 01/26/1996
		2a. Mailing Address		4. FEI Number 59-1521822	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
<b>23</b> Zip	Country	<b>28</b>	Country	8. This corporation has liability for	
24	25		30	Florida Statutes	]Yes ⊠ No
	9. Name and Address of Curren	l Registered Agent		10. Name and Address of New Re	gistered Agent
81 Name				LUIS MARTIN	/
TENENBAUM, HERMAN			82 Street A	Address (P.O. Box Number is Not Acceptat バクチ 4/ らんい・ 5な ら	ole)
6545 INDIAN CREEK DRIVE 70 9 47 STE. #401				3.20. 32 3	
MIAMI BEACH FL 33141			B4 City	He i i i	85 Zip Code
44 6	10.4.4	2 4 012 1500 Florida Chatta		MAMI	FL 33/65
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  02-23-97					
SIGNATURE _	Signature, typied or printed name of registeredinge		Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	S	<b>⊠</b> DELETE	1.1 TITLE	TREASURER D.	Change
NAME	MARTIN, LOUIS		1.2 NAME	MARTIN, LUIS 10441 S.W. 5257. MIAMI, FL. 3316	
STREET ADDRESS	10441 SW 52 ST		1.3 STREET ADDRESS 1.4 City-St-Zip	MIAMI F1. 3316	5
CITY-ST-ZIP TITLE	MIMAI FL TDD	₩ DELETE	2.1 TITLE	Ducciscis	XI Change     Addition
NAME	TENENBAUM, HERMAN		2.2 NAME	HARBY, LORRAINE 6545 INDIAN CREEK	\
STREET ADDRESS	6545 INDIAN CREEK DR		2.3 STREET ADDRESS	6545 INSIAN CREEK	DR. #508
CITY-ST-7IP	MIAMI BEACH FL	N/ nc. cre	2.4 CiTY+ST-ZIP	MIAMI BEACH, FL. 3	3314
TITLE	BVP	X DELETE	31 TITLE	VICE PRESIDENT	☐ Change ☐ Addition
NAME STREET ADDRESS	HARDY, LORRAINE 6545 INDIAN CREEK DR		32 NAME 33 STREET ADDRESS	JORGE RAUL 65X5 INDIAN CREEK	DR. #206
CITY-SI-ZIP	MIAMI BEACH FL		3.4. CITY-ST-ZIP	MIAMI BEACH, FL. 3.	31%1
TITLE	D	☐ DELETE	4.1 TITLE	SECRETARY D	☐ Change ☑ Addition
NAME	COSTALES, GLADYS		4.2 NAME	DEL CASTILLO KAIMUNE	lo
STREET ADDRESS	1623 COLLIN AVE # 714		4.3 STREET ADDRESS	8095 S.W. 89 COURT MIAMI. FL. 33173	
CITY-ST-ZIP TITLE	MIAMI BEACH FL	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	D	Change X Addition
NAME	DD Guardia, Luis Mr	LL DELECT	5.2 NAME	BIEDRANE FRANK	
STREET ADDRESS	6545 INDIAN CREEK DR. APT	#309	5.3 STREET ADDRESS	61-15 97Th Ave. #1 REGO PARK, NY. 113	=/4 E
CITY - ST - ZIP	MIAMI BEACH FL 33141		5.4 CITY-ST-ZIP	KOGO TAKK, NY 113	
TITLE	D	<b>≥</b> DELETE	6.1 TITLE		Change Addition
NAME	JORGE, RAUL	. 000	6.2 NAME		
STREET ADDRESS	6545 INCIAN CREEK DRIVE	206	6.3 STREET ADDRESS		
14. I do heret	MIAMI BEACH FL  by certify that the information supplied	d with this filing does not qualify	6.4 CITY-ST-ZIP for the exemption s	tated in Section 119.07(3)(I), Florida Statute	es. I further certify that the
informatio	n indicated on this annual report or s	supplemental annual report is tru the receiver or trustee empower	ue and accurate and ered to execute this r	that my signature shall have the same leg- eport as required by Chapter 617, Florida	al effect as if made under oath; that

SIGNATURE:

**FILED** 

Feb 28 1997 8:00am

Secretary of State