

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001414

**FILED**  
**Mar 03, 2016**  
**Secretary of State**  
**CC8424439453**

**Entity Name:** GLOBAL SHIPPERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

13391 MC GREGOR BLVD  
SUITE 110  
FT. MYERS, FL 33919

**Current Mailing Address:**

13391 MC GREGOR BLVD  
SUITE 110  
FT. MYERS, FL 33919 US

**FEI Number: 65-0483132**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHADWICK, MARK  
13391 MC GREGOR BLVD  
SUITE 110  
FT. MYERS, FL 33919 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: MARK CHADWICK**

**03/03/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            CHADWICK, MARK  
Address        3135 EASTON TURNPIKE  
City-State-Zip: FAIRFIELD CT 06828

Title            DIRECTOR  
Name            PARISEAU, PHILIP  
Address        500 STAPLES DR  
City-State-Zip: FRAMINGHAM MA 01702

Title            DIRECTOR  
Name            BARKAC, KAREN  
Address        ONE PPG PLACE  
City-State-Zip: PITTSBURGH PA 15272

Title            TREASURER  
Name            CARTER, MAUREEN  
Address        4211 METRO PARKWAY  
City-State-Zip: FT. MYERS FL 33916

Title            DIRECTOR  
Name            GODDARD, BRENT  
Address        800 E BEATY ST  
City-State-Zip: DAVIDSON NC 28036

Title            DIRECTOR  
Name            ESPER, ANA  
Address        25225 DETROIT RD.  
City-State-Zip: WESTLAKE OH 44145

Title            SECRETARY  
Name            QUACKENBUSH, MICHAEL  
Address        13391 MC GREGOR BLVD  
                 SUITE 110  
City-State-Zip: FT. MYERS FL 33919

Title            DIRECTOR  
Name            STANSBURY, MARK  
Address        5600 SAND LAKE ROAD  
City-State-Zip: ORLANDO FL 32819

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL A. QUACKENBUSH**

**SECRETARY/GSA OCEAN LEADER    03/03/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SIEFRING, GARY  
Address 5965 GRAFTON ROAD  
City-State-Zip: VALLEY CITY OH 44280

Title DIRECTOR  
Name DEGATEANO, LEONE  
Address 100 NEMEC WAY  
City-State-Zip: BYHALIA FL 38611

Title DIRECTOR  
Name O'TOOLE, DAVID  
Address 100 THE MOUNTAIN ROAD  
City-State-Zip: FRAMINGHAM MA 01701

Title DIRECTOR  
Name WILSON, PHIL  
Address 1525 HOWE STREET  
City-State-Zip: RACINE WI 53403

Title DIRECTOR  
Name PLANKEY, WILLIAM M  
Address 10 LEIGHTON ROAD  
City-State-Zip: MILFORD CT 06460