

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

DOCUMENT# N94000001414

**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

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*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    03/03/2016  
LEADER**

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