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Apr 28 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702898 (8)

1. Corporation Name

FLORIDA LEAGUE OF CITIES, INCORPORATED

Principal Place of Business

Mailing Address

201 WEST PARK AVENUE
P.O. BOX 1757
TALLAHASSEE FL 32302-1757

201 WEST PARK AVENUE
P.O. BOX 1757
TALLAHASSEE FL 32302-1757



3. Date Incorporated or Qualified
12/13/1935

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number
59-6001124

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SITTIG, MICHAEL
201 WEST PARK AVENUE
TALLAHASSEE FL 32301

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D
STREET ADDRESS LIEBERMAN, HON I
CITY-ST-ZIP 2000 CITY HALL DRIVE
LAUDERHILL FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 115 S. Andrews Avenue
1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE ☐ DELETE
NAME P
STREET ADDRESS SCHULTZ, HON. L
CITY-ST-ZIP 1820 LAUREL OAK DRIVE, SOUTH
ROCKLEDGE FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME PP
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME PP
STREET ADDRESS ANTHONY, HON. C E.
CITY-ST-ZIP 335 S. W. 2ND AVENUE
SOUTH BAY FL

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME P
3.3 STREET ADDRESS Naugle, Hon. Jim
3.4 CITY-ST-ZIP 100 N. Andrews Ave.
Fort Lauderdale, FL 33301

TITLE ☐ DELETE
NAME D
STREET ADDRESS PENELAS, HON. ALEXANDER
CITY-ST-ZIP 111 NW 1ST ST, STE 320
MIAMI FL 33128

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME D
STREET ADDRESS THOMPSON, HON. GERALD F.
CITY-ST-ZIP 115 S ANDREWS AVE #416
FT LAUDERDALE FL 33301

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME V
5.3 STREET ADDRESS Ferreri, Hon. Sam
5.4 CITY-ST-ZIP 5985 10th Avenue, North
Greenacres, FL 33463-2399

TITLE ☐ DELETE
NAME D
STREET ADDRESS MARTIN, HON. S GIBBS
CITY-ST-ZIP 301 N. WHEELER STREET
PLANT CITY FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)