FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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DOCUMENT # **705460** **(4)**

1. Corporation Name

AMERICAN HEART ASSOCIATION, FLORIDA AFFILIATE, I NCORPORATED

Principal Place of Business	Mailing Address
1213 16TH ST. N. PO BOX 33035 ST PETERSBURG FL 33705-8092	1213 16TH ST. N. PO BOX 33035 ST PETERSBURG FL 33705-8092

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/28/1959
3a. Date of Last Report: 04/21/1994
4. FEI Number: 59-0637852 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status XX **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

BRENNAN,JOHN J.
1213 16TH ST. N.
ST. PETERSBURG FL 33705

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: John J. Brennan — JOHN J. BRENNAN- EXECUTIVE VICE PRESIDENT — DATE: 3/21/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	11 TITLE	D/C Chairman of the Board	☒ Change ☐ Addition
NAME	BROOME, WILLIAM R.H. E	12 NAME	Broome, William R.H.	
STREET ADDRESS	801 SPENCER DR.	13 STREET ADDRESS	1818 Australian Ave S. Suite 202	
CITY-ST-ZIP	WEST PALM BCH. FL	14 CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE	PD	21 TITLE	D/P President	☒ Change ☐ Addition
NAME	WAGENER, SONJA R	22 NAME	John A. Hildreth, MD	
STREET ADDRESS	991 DOVE AVE.	23 STREET ADDRESS	3355 Burns Road #301	
CITY-ST-ZIP	MIAMI SPGS. FL	24 CITY-ST-ZIP	West Palm Beach, FL 33410	
TITLE	DP	31 TITLE	D Vice Chairman of Board	☐ Change ☒ Addition
NAME	HILDRETH, JOHN A. M	32 NAME	Goldberg, Stephen R.	
STREET ADDRESS	3355 BURNS RD., #301	33 STREET ADDRESS	6731 15th Avenue North	
CITY-ST-ZIP	PALM BCH. FL	34 CITY-ST-ZIP	St. Petersburg, FL 33710	
TITLE	DV	41 TITLE		☐ Change ☐ Addition
NAME	SITES, JOHN D. M	42 NAME		
STREET ADDRESS	131 MAGNOLIA AVE., S.E.	43 STREET ADDRESS		
CITY-ST-ZIP	FT. WALTON FL	44 CITY-ST-ZIP		
TITLE	DV	51 TITLE		☐ Change ☐ Addition
NAME	SEALS, A. ALLEN M	52 NAME		
STREET ADDRESS	3550 UNIVERSITY BLVD. #302	53 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	54 CITY-ST-ZIP		
TITLE	SD	61 TITLE	T	☒ Change ☐ Addition
NAME	BURNS, THOMAS C	62 NAME	Landry, John P.	
STREET ADDRESS	777 S. FLAGLER DR., #1200W	63 STREET ADDRESS	2439 Wisteria Street	
CITY-ST-ZIP	WEST PALM BCH. FL	64 CITY-ST-ZIP	Sarasota, FL 34239	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: William R.H. Broome, Esq. — Chairman of the Board — 3/20/95 — 813/894-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0065621