## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 707911

(4)

## AMBASSADORS INTERNATIONAL INC

Principal Place of Business Mailing Address				4 168tin 18841 88111 188118 t810t 11881	T 1187 A1257 A1854 A1811 A1815 A1915 A1911 A1914 A	
	M MEYER COURT I GARDENS FL 33410	13408 WILLIAM MEYER ( PALM BEACH GARDENS				
					3. Date Incorporated or Qualified 10/02/1964	3a. Date of Last Report 02/06/1995
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 59-6169720	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	25 Palm Beach	Ζ <sub>(</sub> ρ <b>29</b>	30 Palm	Beach	<u> </u>	Yes No
	9. Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of New R	legistered Agent
CTANTO	N CCOALD B		[8]	marne		
STANTON,GERALD B 13408 WILLIAM MEYER COURT PALM BEACH GARDENS FL 33410			82	Street Addres	ss (P.O. Box Number is Not Acceptab	(9k
1 AUN D	CHOIT GANDENOTE SOFT					
			84	City		FL 85 Zip Code
or register	to the provisions of Sections 617.0502 red agent, or both, in the State of Flori ith, and accept the obligations of, Sect	da. Such change was authorize	s, the above-r d by the corp	named corporat oration's board	ion submits this statement for the pur of directors. I hereby accept the appr	rpose of changing its registered office
SIGNATURE						
12.	Signature, typed or printed name of registered agent OFFICERS AN		E Registered Ages	t signature required v	vhen reinstating: ADDITIONS/CHANGES TO OFF	DATE
T.TLE	D	DELETE	1 I TITLE		ADDITIONS CHANGES TO OFF	Change Addition
NAMÉ	HARNSROTE, RON (MD)		12 NAME			
STREET ADDRESS	15580 BALLANEA LANE		13 STREET	ADDRESS		
CITY - ST - ZIP	WELLINGTON FL		14 CITY - S			
Talle	SD	DELETE	2 1 TITLE	11-211		☐ Change ☐ Addition
NAME	STANTON, MARY E		2.2 NAME			
STREET ADDRESS	13408 WM. MEYER CT.		2 3 STREET	ADDRESS		
CITY-ST-ZIP	PALM BCH. GARDENS FL 33-	<b>410</b>	2 4 CHTY -			
TITLE	PD	DELETE	3 1 TITLE			Change Addition
NAME	STANTON, GERALD B		3.2 NAME			
STREET ADDRESS	13408 WM. MEYER CT.		3 3 STREET	ADDRESS		
CHTY - ST - Z'P	PALM BEACH GARDENS FL 3	3410	34 CITY-	ST - Z.P		
THILF		DELETE	4 1 TITLE			Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZiP			4.4 CITY - 9	I - ZIP		
TITLE		DELETE	5 1 THILE			Change Addition
NAME			5.2 NAME			
STHEET ADDRESS			5 3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY - 9	T - ZIP		
TiTLE		DEFELE	61 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			63STREET	ADDRESS		
CITY - ST - ZIP			6.4 CITY - S	T-ZIP		07/200 Florido Ctotutos 15 whor

4. 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)(k), 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

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Van 23, 1996 (407) 626-6654

CR2E037 (12/9)