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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

(8)

THE MARINE AQUARIUM SOCIETY OF THE PALM BEACHES.

INC. Mailing Address Principal Place of Business P.O. BOX 182 P.O. BOX 182 WEST PALM BEACH FL 33402 WEST PALM BEACH FL 33402 3. Date Incorporated or Qualified 05/24/1967 03/31/1995 Applied For 4. FEI Numbe 2a. Mailing Address 2. Principal Place of Business 59-1973161 Not Applicable 21 26 \$8,75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing Oity & State Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s. 199.032,
 Florida Statutes

Yes X No Country Zin 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GLICKSTEIN, MARVIN R Street Address (P.O. Box Number is Not Acceptable) 82 **504 GREENWAY DRIVE** 83 NO. PALM BCH. FL 33408 Zip Code 85 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socion 617.0503, Florida Statutes SIGNATURE DATE (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change Addition President DELETE 1.1 TITLE TILLE Denise Rybovich MARION LEAN 1.2 NAME 3826 Beresford Rd.E NAME 1131 HARMONY WAY 1.3 STREE! ADDRESS SARREL ADDRESS West Palm Beach , FL 33417 ROYAL PALM BEACH FL 1.4 CITY - ST - ZIP CITY - ST - ZIF Change Addition DELETE VP 2.1 TITLE TITLE STEVE HOUSE 2.2 NAME NAME 207 VALENCIA RD 2.3 STREET ADDRESS STREET ADDRESS W. PALM BEACH FL 2 4 CITY - ST - ZIP CHTY - ST - ZIP Change Addition DELETE 3 1 TITLE TITLE BARBAR SCHOLLY 3.2 NAME NAME 1868 PLEASANT DR 3.3 STREET ADORESS STREET ADDRESS NORTH PALM BEACH FL 3.4 CHY-SI-ZIP CHY-ST-ZiP Change Addition DELETE 41 TILE TITLE ROOT, JOHN 4 2 NAME NAME 503 ROSELAND DR. 4.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 4.4 CITY - ST - ZIP City-St-ZiP Change Addition DELETE 5 1 TITLE TiTLE **GUIEL, VINCENT** 5.2 NAME NAME 5836 PURDY LANE 5.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 5.4 CITY - ST-ZIP CHIY-ST-ZIP Change Addition DELETE 6 1 TITLE

14. Ido 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 cath, 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 or an attachment with an address appears in Block 12 or Block

NG OFFICER OR DIRECTOR

6.2 NAME

6 3 STREET ADORESS

6.4 C-TY - ST - ZIP

SIGNATURE:

ZORATTI. RON

437 GULFSTREAM RD

PALM SPRINGS FL

TITLE

STREET ADDRESS

CITY - ST-ZIP

2/24/96 407-686-3984

(12/95) CR2E037