


FILE NOW: FILING FEE IS \$61.25

FILED

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
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DOCUMENT # **716243** (1)
1. Corporation Name
THE FLORIDA STATE WATCHMAKERS ASSOCIATION, INC.



Principal Place of Business 11812-A 56TH ST. TAMPA FL 33617 US	Mailing Address 11812-A 56TH ST. TAMPA FL 33617-1652 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 03/20/1969		3a. Date of Last Report 05/01/1996	
4. FEI Number 23-7368901		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No							

9. Name and Address of Current Registered Agent STREEPER, MICHAEL W. 11812-A 56TH ST. TAMPA FL 33617				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			
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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 **MICHAEL W. STREEPER, EXEC. DIR.** *Michael W. Streper* **4/15/97**
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 1?	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VARJABEDIAN, SAM	1.2 NAME	
STREET ADDRESS	3265 CARDINAL DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH. FL 32963	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAGGARD, DOUG	2.2 NAME	
STREET ADDRESS	PO BOX 111 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	MANGO FL 33550	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEADORS, RALPH	3.2 NAME	
STREET ADDRESS	1419 ALWYNNE DR. S.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	3.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VARJABEDIAN, DEBBIE	4.2 NAME	
STREET ADDRESS	3265 CARDINAL DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH. FL 32963	4.4 CITY-ST-ZIP	
TITLE	EX/S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREEPER, MICHAEL W.	5.2 NAME	
STREET ADDRESS	11812-A 56TH ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33617	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: **MICHAEL W. STREEPER, EXEC. DIR.** *Michael W. Streper* **4/15/97 (813) 988-0787**

CR2E037 (9/96)