


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **716243**

(1)

1. Corporation Name

~~THE FLORIDA STATE WATCHMAKERS ASSOCIATION, INC.~~
THE FLORIDA WATCH & CLOCKMAKERS ASSN., INC.



Principal Place of Business

Mailing Address

11812-A 56TH ST.
TAMPA FL 33617
US

11812-A 56TH ST.
TAMPA FL 33617
US

3. Date Incorporated or Qualified

03/20/1969

4. FEI Number

23-7368901

Applied For

Not Applicable

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

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

Trust Fund Contribution

☐

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible

Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STREPER, MICHAEL W.
11812-A 56TH ST.
TAMPA FL 33617

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

Michael W. Streper

(NOTE: Registered Agent signature required when reinstating)

4/7/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME VARJABEDIAN, SAM
STREET ADDRESS 3265 CARDINAL DR.
CITY-ST-ZIP VERO BCH. FL 32963

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME RENNERT, AARON M.
1.3 STREET ADDRESS 3038 PINETREE ST.
1.4 CITY-ST-ZIP PT. CHARLOTTE, FL 33952-6543

TITLE VD ☐ DELETE
NAME MAGGARD, DOUG
STREET ADDRESS PO BOX 111 N/A
CITY-ST-ZIP MANGO FL 33550

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

TITLE T ☐ DELETE
NAME MEADORS, RALPH
STREET ADDRESS 1419 ALWYNNE DR. S.
CITY-ST-ZIP LEHIGH ACRES FL 33936

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD ☒ DELETE
NAME VARJABEDIAN, DEBBIE
STREET ADDRESS 3265 CARDINAL DR.
CITY-ST-ZIP VERO BCH. FL 32963

4.1 TITLE SD ☒ Change ☐ Addition
4.2 NAME JOYCE, ANGEL L.
4.3 STREET ADDRESS 4901 N. FLORIDA AVE.
4.4 CITY-ST-ZIP TAMPA, FL 33603

TITLE EX/S ☐ DELETE
NAME STREPER, MICHAEL W.
STREET ADDRESS 11812-A 56TH ST.
CITY-ST-ZIP TAMPA FL 33617

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 000002489000
5.3 STREET ADDRESS -04/15/98--01017--014
5.4 CITY-ST-ZIP ***61.25

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

14. I 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. Streper MICHAEL W. STREPER

4/7/98

(813) 988-0737

CR2E037 (1097)