## 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 #

717899

(9)

FLORIDA ATTRACTIONS ASSOCIATION, INC.

MIAMI FL

BRAVO, RAYMOND

ST AUGUSTINE FL

170 SAN MARCOS AVE.

CITY - ST - ZIP

STREET ADDRESS

SIGNATURE:

TITLE

NAME

FLORIDA ATTHACTIONS ASSOCIATION, INC.								
Principal Place of	Business	Mailing Address		,	***************************************			
200 W. COLLEGE AVE TALLAHASSEE FL 32301		P. O. BOX 10295 P.O. BOX 10295 TALLAHASSEE FL 3230			And a Constitution	3a Date	e of Last Report	
US		US			Incorporated or Qualified 01/15/1970		14/28/1995	
2. Principal Place	e of Business	2a. Mailing Address		4. FLI N			Applied For	
21	<b>.</b>	26					Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certif	icate of Status Desired	<b></b>	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
<b>23</b> Zip	Country	Zio	Country	8. This	corporation has liability for i	ntangible tax	under s. 199.032,	
24)	25 29 30			Florida Statutes Yes No 10. Name and Address of New Registered Agent				
<u> </u>	9. Name and Address of Curre	ent Registered Agent			e and Address of New R	egistered A	gent	
			1 1	ame				
ROSS, DONNA H.			<b>82</b> S	reet Address (P.O. Bo	Address (P.O. Box Number is Not Acceptable)			
200 W. COLLEGE AVE.			83					
	TALLAHASSEE FL 32301							
(1.65			<b>84</b> C	ity'		FL	85 Zip Code	
	the provisions of Sections 617.05				to this statement for the nu		nging its registered office	
or registere familiar with	the provisions of Sections 617.05 d agent, or both, in the State of Fich, and accept the obligations of, Sesignature, typed or printed name of registered as	oction 617.0503, Florida Statutes	S.	na correspond when recatable		DATE		
12.	OFFICERS A	ND DIRECTORS	13.		THONS/CHANGES TO OFF	TOERS AND	Change *Addition	
TITLE	D	DELETE	1.1 TITLE	D	Atherholt	L		
NAME	STORK, THOM		1 2 NAME	1 1000	Third Street	S		
STREET ADDRESS	3000 E BUSCH BLVD		1.3 STREET ADD				701-4901	
CITY-ST-2IP	TAMPA FL	FTOSISI	1.4 CITY-ST-Z 2 1 TITLE		St. Petersburg, FL 33701-4901			
TITLE	CD	[☐DELETE	2 2 NAME		Lupfer			
NAME	DU MOND, SHARON		2 3 STREET AD	DIII	Vectorspace	Blvd		
STREET ADDRESS	14805 SW 216TH ST		2 4 CITY - ST -	70 Titus	mitueziiie. FI. 32780-8040			
CITY - ST - ZIP	MIAMI FL.	FIDELETE	3 1 TITLE	D	Y # # # \		Change XXAddition	
TITLE	D DINCKETT BILL	<u></u>	3 2 NAME	Donna	Turner			
NAME .	PUCKETT, BILL 999 ANASTASIA BLVD		3 3 STREET AD	DRESS 14501	s Orange Bi	Lossom	Trail	
STREET ADDRESS	ST. AUGUSTINE FL		34. CITY - ST-	ZIP Orlan	do, FL 3283	27_669	19	
CITY-ST-ZIP TITLE	PO	DELETE	4 1 TITLE	D/P	•		Change XIX Addition	
NAME	JACKSON, RICHARD		4 2 NAME	Paul 1	Burns		200	
STREET ADDRESS	ASSESSMENDAL OTIDIOS DI AZA		43 STREET AC	ORESS 5728 1	5728 Major Blvd., Suite 700			
CITY-ST-ZIP	ORLANDO FL		4.4 CITY - ST -	ZIP Orlan	do, FL 3281	9	Change Add-tion	
TITLE	DT	<b>∑</b> DELETE	5 1 TITLE					
NAME	HOYO, JOSE		52 NAME					
STREET ADDRESS	4400 RICKENBACKER CS	WY	5 3 STREET AL	DORESS				

5 4 CITY - ST - 713

6 3 STREET ADDRESS

64 City - St - ZIP

61 TITLE

6.2 NAME

**D**ØELETE

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)(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 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 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 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 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 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 under 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 under the certific 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 under the certific 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 under the certific that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under the certific that the information indicated in the 5-20-96

Addition |

Change

CR2E037 (12/95)