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

LEON	F. STEWART - HAL S. MARC	CHMAN CENTER, IN	IC.		
Principal Place of Business		Mailing Address		(100/11 (600))(0)0 (0)0 (0) (0)	
3875 TIGER BAY ROAD DAYTONA BCH FL 32124 US DAYTONA BCH FL 32124 US US			124		
				3. Date incorporated or Qualified 03/06/1970	3a. Date of Last Report 05/21/1005
2. Principal Pl	ace of Business	2a. Mailing Address		4. F£I Number	05/31/1995 Applied For
11		26		59-1295986	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	1	City & State			7 Tee riequired
3	-	28		Election Campaign Financing Trust Fund Contribution	55.00 May Be Added to Fees
Ζιρ	Country	Zip	Country	8. This corporation has liability for	
4	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Current	Hegistereo Agent	81 Name	10. Name and Address of New F	Registered Agent
129 MIC	ey, ernest d Chigan ave Na Beach FL 32014		82 Street 38 83 84 City	rnest D. Cantle Address (P.O. Box Number is Not Acceptat 75 Tiger Bay Ro) Bytona Buh	pad FL 85 Zip Code 3 2 17 4
or redister	eo agent. Or bom, in me state of Fionoa	- Such change was authoriz	ed by the comoration c	proporation submits this statement for the purboard of directors. I hereby accept the app	recess of changing its registered off
tarrinar wi	in, and accept the obligations of Section	7.0503, Florida Statutes	S.		
SIGNATURE 🏃	Signature, typed or printed name of registered a part an	d tile it applicatory (NC	H: Régistereo Agent signature n	erp real within revustating?	2-16-96
12.	OFFICERS AND		13.	ADDITIONS CHANGES TO OF	ICERS AND DIRECTORS IN 12
TITLE NAME	D DINOCO IAMEO E	DETEIL	1.1 Tift E		Change 🔲 Addition
STREET ADDRESS	HUGER, JAMES E RIDGEWOOD AVE.		1.2 NAME 1.3 STREET ADORESS	0200	
CITY ST ZIP	DAYTONA BCH. FL		1.4 CHY+ST-ZIP	935 SycamoreStreet DayTona BCH FC 3	- -::!il.
TITLE	S	DELETE	2 1 TITLE	VP	Change Addition
NAME	ATTICK, WILLIAM E.		2.2 NAME		
STREET ADDRESS	1308 PEACHTREE DR.		2.3 STREET ADDRESS		
CHTY-ST-ZIP TIFLE	DAYTONA BCH FL	DELETE	2 4 CITY - ST - 7IP		
NAMÉ	D Kleinschmidt, Charles H.	Flactor	3.1 TITEF 3.2 NAME		Change Addition
STREET ADDRESS	233 OAK RIDGE ST.		3.3 STREET ADDRESS	PO BOX 9356	
CITY-ST-ZIP	HOLLY HILL FL		3.4. CITY - ST - 7IP	DAYTONA BCH, EL	
TITLE	VP	DELETE	4 1 TITLE	D	Change Addition
NAME	LYNN, EVELYN		4 2 NAME		
STREET ADDRESS	824 PENINSULA DR.		4 3 STREET ADDRESS		
CITY - ST- ZIP TITLE	ORMOND BCH FL	DELETE	4 4 CITY-ST-ZIP	P	(SPOharra DA 1991
NAME	pt Beighle, J. W	Poereit	5 1 TITLE 5 2 NAME	*	Change
STREET ADDRESS	6327 PALMAS BAY CIR.		5.3 STREET ADDRESS		
CHTY-ST-ZIP	PT ORANGE FL		5 4 CITY - ST - ZIP		
TITLE	S	DELETE	61 TITLE		☐ Change ☐ Addition
NAME	Barbara McGrath		6.2 NAME		- V
STREET ADDRESS	275 Riverside Driv Ormand Boh FL	e	6.3 STREET ADDRESS		
CITY-ST-ZIP	Comonel Beh FL	32174	6 4 CITY - ST - ZIP		
oath; that	. De momation indicated on this annual	report or supplemental and tion or the receiver or truste	ual report is true and ac e empowered to execut	lify for the exemption stated in Section 119 curate and that my signature shall have the e this report as required by Chapter 617, FI	come local effect on if made under

SIGNATURE: X

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 -16-96 Dayline Prone •