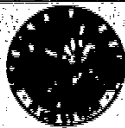


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 724476

(7)

1. Corporation Name

FLORIDA REGION-AMERICAN SOCIETY OF PHOTOGRAMMETRY,
INC

Principal Place of Business

Mailing Address

100 8TH AVE SE
ST. PETERSBURG FL 33701

100 8TH AVE SE
ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1972

3a. Date of Last Report

04/04/1994

4. FEI Number

54-1386893

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCGARRY MACAULAY, GAIL
FLORIDA MARINE RESEARCH INSTITUTE
100 8TH AVE SE
ST PETERSBURG FL 33701

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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 12

TITLE	P
NAME	BENWARE, EUGENE
STREET ADDRESS	7788 38TH TERR N
CITY - ST - ZIP	ST PETERSBURG FL
TITLE	PP
NAME	CLAPP, CORNELL
STREET ADDRESS	1722 W OAK RIDGE RD
CITY - ST - ZIP	ORLANDO FL
TITLE	ST
NAME	MACAULAY
STREET ADDRESS	100 8TH AVE SE
CITY - ST - ZIP	ST. PETERSBURG FL
TITLE	D
NAME	DEGNER, JANET D.
STREET ADDRESS	512 WEIL HALL
CITY - ST - ZIP	GAINESVILLE FL
TITLE	D
NAME	WATTS, CHARLES
STREET ADDRESS	4 SIGNAL AVE ORMOND BCH AIRPORT BUS PK
CITY - ST - ZIP	ORMOND BCH FL
TITLE	D
NAME	DEWITT, BON
STREET ADDRESS	348 WEIL HALL
CITY - ST - ZIP	GAINESVILLE FL

1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	33709
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	32859
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	DIRECTOR (D)
3.3 STREET ADDRESS	MacAulay, Gail McGarry
3.4 CITY - ST - ZIP	33701
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Secretary/Treasurer (S/T)
4.3 STREET ADDRESS	Burnoughs, Brenda S.
4.4 CITY - ST - ZIP	6905 T.G. Lee Blvd., Suite 150 ORLANDO, FL 32822
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	VICE PRESIDENT
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	32174
6.1 TITLE	☒ Change ☒ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	32611

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 110.07(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 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: *Gail McGarry MacAulay* 4/10/95 (813) 896-8626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR