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 25 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734324 (7)

1. Corporation Name

FLORIDA GOLD COAST CHAPTER #60 NAWCC, INC.

Principal Place of Business	Mailing Address
~~4700 CANAL 44 RD~~ ~~LAKE WORTH FL 33463~~ ~~USA~~	~~4700 CANAL 44 RD~~ ~~LAKE WORTH FL 33463~~ ~~USA~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/12/1975
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-2000731 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 P.O.Box 70606	26 P.O. Box 70606
22 Ft. Lauderdale,Fl.	27 Ft. Lauderdale, Fl.
23 33307	28 33307
24 Zip	29 Zip
25 Country	30 Country

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~BENZ GONIA~~ ~~4700 CANAL 44 RD~~ ~~LAKE WORTH FL 33463~~	81 Name: Miriam S. Fanshaw - Secretary 82 Street Address (P.O. Box Number is Not Acceptable): ~~P.O. Box 70606~~ 140 N.E. 19th Ct E 119 83 84 City: Ft. Lauderdale, Fl. FL 85 Zip Code: ~~33307~~ 33305

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: Miriam S. Fanshaw Secretary Miriam S. Fanshaw 4/16/95
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	DT		1.1 TITLE	☒ Change ☐ Addition
NAME	~~FANSHAW LAWRENCE~~		1.2 NAME	D/T
STREET ADDRESS	~~140 NE 19TH CT PE 119~~		1.3 STREET ADDRESS	Robert W. Spinney
CITY-ST-ZIP	~~FT LAUDERDALE FL~~		1.4 CITY-ST-ZIP	1158 S.E. 6th Court Dania, Fl. 33~~004~~
TITLE	PD		2.1 TITLE	☒ Change ☐ Addition
NAME	~~BENZ LOU~~		2.2 NAME	P/D
STREET ADDRESS	~~4700 CANAL 44 ROAD~~		2.3 STREET ADDRESS	Lawrence J. Fanshaw
CITY-ST-ZIP	~~LAKE WORTH FL~~		2.4 CITY-ST-ZIP	P.O. Box 70606 Ft. Lauderdale, Fl. 33307 N.A.
TITLE	VD		3.1 TITLE	☐ Change ☐ Addition
NAME	BANKS CHARLES		3.2 NAME	VD CHARLES BANKS
STREET ADDRESS	1132 SE 6TH TERR	SAME	3.3 STREET ADDRESS	~~SAME~~ 1132 SE 6th TERR.
CITY-ST-ZIP	FT LAUDERDALE FL 33316		3.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33316
TITLE	SD		4.1 TITLE	☒ Change ☐ Addition
NAME	~~BENZ GONIA~~		4.2 NAME	S/D
STREET ADDRESS	~~4700 CANAL 44 RD~~		4.3 STREET ADDRESS	Miriam S. Fanshaw
CITY-ST-ZIP	~~LAKE WORTH FL~~		4.4 CITY-ST-ZIP	~~P.O.Box 70606~~ 140 N.E. 19th Ct E 119 ~~Ft. Lauderdale, Fl. 33307~~ Ft. Lauderdale Fl 33305
TITLE	VD		5.1 TITLE	☐ Change ☐ Addition
NAME	ZERN, DONALD		5.2 NAME	ZERN DONALD
STREET ADDRESS	1065 NE 96TH ST	SAME	5.3 STREET ADDRESS	1065 NE 96th St.
CITY-ST-ZIP	MIAMI SHORES FL		5.4 CITY-ST-ZIP	SAME MIAMI SHORES, F. 33138
TITLE	SD		6.1 TITLE	☒ Change ☐ Addition
NAME	~~GREENBERG HARRY~~		6.2 NAME	S/D
STREET ADDRESS	~~8600 N CAMPANELLA BLVD~~		6.3 STREET ADDRESS	Miriam S. Fanshaw
CITY-ST-ZIP	~~PLANTATION FL~~		6.4 CITY-ST-ZIP	~~P.O.Box 70706~~ 140 NE. 19th Ct E 119 ~~Ft. Lauderdale, Fl. 33307~~ Ft. Lauderdale Fl 33305

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)(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: Miriam S. Fanshaw MIRIAM S. FANSHAW (305) 564-428[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #

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