

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

100001777731
-04/12/96--01009--019
***70.00

DOCUMENT # **734838** (6)

1. Corporation Name

THE MARINERS CLUB ASSOCIATION, INC.

Principal Place of Business

**20758 SOUTHWEST 84TH AVENUE
MIAMI FL 33189**

Mailing Address

**20758 SOUTHWEST 84TH AVENUE
MIAMI FL 33189**

3. Date Incorporated or Qualified
01/22/1976

3a. Date of Last Report
04/07/1995

2. Principal Place of Business
21 8414 SW 208th Street

2a. Mailing Address
26 Same

4. FEI Number
59-2421563

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State
23 Miami, FL 33189

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip Country
24 33189 25 USA

Zip Country
29 30

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

**FIESELMAN, CHARLOTTE A
20758 S.W. 84TH AVE.
MIAMI FL 33189**

81 Name
E. Brad Edwards

82 Street Address (P.O. Box Number is Not Acceptable)
8414 SW 208th Street

83

84 City
Miami

FL 85 Zip Code
33189

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 **E. BRAD EDWARDS, PRESIDENT**

E. Brad Edwards

3/25/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required on this statement)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **FIESELMAN, CHARLOTTE A**
STREET ADDRESS **20758 SW 84TH AVE.**
CITY-ST-ZIP **MIAMI FL 33189**

1.1 **Secretary** ☒ Change ☐ Addition
Director

TITLE **VD** ☐ DELETE
NAME **EDWARDS, BRAD**
STREET ADDRESS **8414 SOUTHWEST 208 STREET**
CITY-ST-ZIP **MIAMI FL 33189**

2.1 **President** ☒ Change ☐ Addition
Director

TITLE **S** ☐ DELETE
NAME **PORTER, SUSAN**
STREET ADDRESS **8418 SW 208 STREET**
CITY-ST-ZIP **MIAMI FL**

3.1 **Treasurer** ☒ Change ☐ Addition
Director
3.2 **Garcia, Susan**

TITLE **T** ☒ DELETE
NAME **PRANO, FRANK**
STREET ADDRESS **20752 SW 84TH AVENUE**
CITY-ST-ZIP **MIAMI FL**

4.1 **Director** ☐ Change ☒ Addition
4.2 **Maritza Cruz**
4.3 **8410 SW 208 Street**
4.4 **Miami, FL 33189**

TITLE **D** ☐ DELETE
NAME **NELLISSSEN, DON**
STREET ADDRESS **20750 SW 84TH AVENUE**
CITY-ST-ZIP **MIAMI FL**

5.1 **Vice President** ☒ Change ☐ Addition
Director

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE **100001777731** ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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: *E. Brad Edwards*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
E. Brad Edwards, President

3/25/96
Date

(305) 860-7116
Daytime Phone #

CR2E037 (12/95)

14-10-96