

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

DOCUMENT # 748728

(3)

1. Corporation Name

PAN AM RETIREES CLUB, INC.

Principal Place of Business

1507 CARIBBEAN DRIVE
PO BOX 360433
MELBOURNE FL 32936

Mailing Address

1507 CARIBBEAN DRIVE
PO BOX 360433
MELBOURNE FL 32936

FILED
Jan 29 1996 8:00am
Secretary of State



3. Date Incorporated or Qualified
08/30/1979

3a. Date of Last Report
04/05/1995

4. FEI Number
59-1957101

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOETTNER, J. P. (MR.)
1507 CARIBBEAN DRIVE
MELBOURNE FL 32935

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 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

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 VD ☐ DELETE
NAME BOETTNER, J.P.
STREET ADDRESS 1507 CARIBBEAN DR
CITY- ST- ZIP MELBOURNE FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE D ☐ DELETE
NAME BOETTNER, MARJORIE
STREET ADDRESS 1507 CARIBBEAN DRIVE
CITY- ST- ZIP MELBOURNE, FL 00000

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE SD ☐ DELETE
NAME SLOCUM, BOBBIE
STREET ADDRESS 2506 S COUNTRY CLUB RD
CITY- ST- ZIP MELBOURNE FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE TD ☐ DELETE
NAME HENRY, D.A.
STREET ADDRESS 1101 S. MIRAMAR AVE.
CITY- ST- ZIP INDIAN LANTIC FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE PD ☐ DELETE
NAME SINCLAIR, HARRY
STREET ADDRESS 127 OCEAN SPRAY AVE.
CITY- ST- ZIP SATELLITE BCH. FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE D ☐ DELETE
NAME MICKEY, ROY
STREET ADDRESS 4112 RAYBURN ROAD
CITY- ST- ZIP COCOA BCH FL

6.1 TITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A. Henry

1/24/96

407-723-4573

CR2E037 (12/95)