FIL	E	NO	W:	FIL	ING	FEE	IS	\$61	.25
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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996	Secretary DIVISION OF C				
DOCUN 1. Corporation	MENT # F9500000110	3 (9)				
Ameri	can Canoe Association	n, Inc.				
Principal Place	of Business Mai	ing Address		1		
7432 A	lban Station Blvd.	Same	as principal	<u>i</u> .		
Suite I			•			
	field, VA 22150			3. Date Incorporated or Qualified 3/08/95	3a. Date of na	Last Report
2. Principal Pla	ace of Business 2a.	Mailing Address		4. FEI Number		Applied For
	Alban Station Blv26d	Same as	Principal	84-0619411		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 '	3.75 Additional Fee Required
City & State	ngfield, VA 28	City & State		Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
3 Spri Zip 4 2215	Country	Zip	Country 30	8. This corporation has liability for in		
<u>-1 2213</u>	9. Name and Address of Current Regist			10. Name and Address of New Re	gistered Agen	it
			81 Name			
	entice-Hall Corp. Sy		82 Street Addre	ess (P.O. Box Number is Not Acceptable	3)	
1201 H	ays Street, Ste #105					
Tallah	assee, FL 32301		83			
•			84 City		FL 85	
or register	to the provisions of Sections 617.0502 and 617 red agent, or both, in the State of Florida. Such tith, and accept the obligations of, Section 617.0 Standard typed or protect name of registered agent and title if a	change was authorized 503, Florida Statutes.	d by the corporation's board	a or directors. Thereby accept the appo	intment as regis	itered ägent. I am
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIR	ECTORS IN 12
TITLE ,	President, D	□DELĒTĒ	1.1 TITLE		Ch	ange
NAME	Janet A. Zeller		1.2 NAME			
STREET ADDRESS	25 Everett Rd.	•	1.3 STREET ADDRESS			
CITY - ST - ZIP	Dunbarton, NH 03045		14 CITY - ST - 7/P			
TITLE	Vice President, D	□ D€LETE	2 1 TITLE		☐ Ch	nange []] Addition
NAME	Chris Nielsen		2 2 NAME			
STREET ADDRESS	11 Overlook Dr.		2.3 STREET ADDRESS			
CITY - ST - ZIP	Long Valley, NJ 078	53	2 4 CATY - ST - ZIP 3 1 TATLE		□ Cr	nange Addition
TITLE	Secretary D Charlie E. Wilson	Doctete	31 MILE 32 NAME		L) [™]	- 3- 🛅 / 100/100/1
NAME STREET ADDRESS	Charlie E. Wilson		3 3 STREET ADDRESS			
CITY-ST-ZIP	25355Hwy 169 S. Zimmerman, MN 55398		34 CITY-ST-ZIP			
TITLE	Treasurer, D	DELETE	4.1 TITLE		Cr	nange
NAME	Tim M. Kelly		4 2 NAME			
STREET ADDRESS	2096 N. Ponce De Le	on	4.3 STREET ADDRESS			
CITY - ST - ZIP	Atlanta, GA 30307		4 4 CITY - ST - ZIP		F1.0.	
TITLE	I .	DELETE	5 1 TITLE			hange 🔲 Addition
NAME			5 2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5 4 CITY - ST-ZIP 6 1 TITLE			hange
TITLE			6 2 NAME	80000187 -06/24/96010	(32,5	
NAME OTREST ADDRESS			6.3 STREET ADDRESS	-U8/24/96U1U	37U27	
STREET ADDRESS			U S SINCE ADDRESS	***61.25		
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(s)(R). Florida Statutes, i furner 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:

Janet A. Zeller April 23, 1996 (603) 528-8721