

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 APR 29 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N01389** (8)

1. Corporation Name

REPUBLICAN NATIONAL FORUM, INC.

Principal Place of Business

Mailing Address

**1301-1335 N.W. 23 STREET
MIAMI FL 33142**

**1301-1335 N.W. 23 STREET
MIAMI FL 33142**

3. Date Incorporated or Qualified

02/10/1984

4. FEI Number

72581031P

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**ARMESTO-GARCIA, ELADIO
1301-1335 N.W. 23 STREET
MIAMI FL 33142**

10. Name and Address of New Registered Agent

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

TITLE **PD** ☐ DELETE
NAME **ARMESTO-GARCIA, ELADIO**
STREET ADDRESS **1301-1335 N.W. 23 STREET**
CITY-ST-ZIP **MIAMI FL 33142**

TITLE **D** ☐ DELETE
NAME **ARMESTO, YOLANDA D**
STREET ADDRESS **6952 WILLOW LANE**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **D** ☐ DELETE
NAME **ARMESTO, ROSA MARIA**
STREET ADDRESS **6952 WILLOW LANE**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **ST** ☐ DELETE
NAME **ARMESTO, MAYTEE' D**
STREET ADDRESS **10811 S.W. 66 DRIVE**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

14. I hereby certify that the information supplied with this filing 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, on or as an attachment with an address.

SIGNATURE:

Eladio Armesto Garcia

APR 14 29, 1980 634-9280

CP2E037 (10/97)