

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Oct 13 1998 8:00am³
Secretary of State

DOCUMENT # N02507

(4)

1. Corporation Name

GREATER FORT LAUDERDALE CHAPTER F.M.P.T.A., INC.



Principal Place of Business

Mailing Address

11 FORT ROYAL ISLE
FT LAUDERDALE FL 33308
US

P.O. BOX 14513
FT LAUDERDALE FL 33302
US

3. Date Incorporated or Qualified

04/12/1984

4. FEI Number

59-2312437

Applied For

Not Applicable

2. Principal Place of Business

21 807 WARREN AVE

2a. Mailing Address

26 P.O. BOX 22207

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 COCOA FL

City & State

28 LAKE BUENA VISTA, FL

Zip

Country

24 32922

25 USA

Zip

Country

29 32830

30 USA

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

9. Name and Address of Current Registered Agent

MICHAEL E. ZEALY SR
11 FT ROYAL ISLE
FT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name JOHN C. CUMMINGS SR.

82 Street Address (P.O. Box Number is Not Acceptable)
15838 THOROUGHMBRED LANE

83

84 City MONTVERDE

FL

85 Zip Code 34756

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 John C. Cummings

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

(NOTE: Registered agent signature required when reinstating)

9/27/98
DATE

12. OFFICERS AND DIRECTORS

TITLE SD ☒ DELETE
NAME HAYNES, LSESLEY
STREET ADDRESS 3950 NW 7TH PL
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE EVD ☒ DELETE
NAME QUAGLIA, ROCCO
STREET ADDRESS 3471 N FEDERAL HWY #603
CITY-ST-ZIP FT LAUDERDALE FL

TITLE VD ☒ DELETE
NAME RYBINSKI, KAREN
STREET ADDRESS 4824 NW 98TH TERRACE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE TD ☒ DELETE
NAME WILKINSON, KIN
STREET ADDRESS 524 NE 21 CT
CITY-ST-ZIP WILTON MANORS FL

TITLE D ☒ DELETE
NAME WENTWORTH, ELIZABETH
STREET ADDRESS 200 E LAS OLAS BLVD #1850
CITY-ST-ZIP FT LAUDERDALE FL

TITLE D ☒ DELETE
NAME MARKS, DAVID
STREET ADDRESS 2576 SE 9TH ST
CITY-ST-ZIP POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME JOHN C. CUMMINGS SR
1.3 STREET ADDRESS 15838 THOROUGHMBRED LANE
1.4 CITY-ST-ZIP MONTVERDE, FL 34756

2.1 TITLE EVD ☒ Change ☐ Addition
2.2 NAME JERRY ALAN
2.3 STREET ADDRESS 1206 AUTUMN
2.4 CITY-ST-ZIP TAMPA FL 33613

3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME CAROLE A FERRILL
3.3 STREET ADDRESS 807 WARREN AVE
3.4 CITY-ST-ZIP COCOA FL 32922

4.1 TITLE T ☒ Change ☐ Addition
4.2 NAME DALE JOHNSON
4.3 STREET ADDRESS 392 LAKEVIEW Terr.
4.4 CITY-ST-ZIP PALM HARBOR FL 34683

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME HELEN B. ESTES
5.3 STREET ADDRESS 3804 CARDINAL CIR
5.4 CITY-ST-ZIP BONITA SPRINGS FL 34134

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME DIANA JOHNSON
6.3 STREET ADDRESS 920 FAIRWAY DR
6.4 CITY-ST-ZIP WINTER PARK FL 32792

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, or on an attachment with an address.

SIGNATURE: Carole A Ferrill

Signature and typed or printed name of signing officer or director

9/27/98

407-632-7488

CR-2037 (5/98)

②

N02507

500002662685
-10/13/98--01043--035
***70.00