

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED

CORPORATION
ANNUAL REPORT
1995



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

1995 MAY -1 12 9 31

DEPT. OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02964

(7)

1. Corporation Name

FIDACAP, INC.

Principal Place of Business

Mailing Address

2611 SARANAC AVE
WEST PALM BEACH FL 33409
US

2611 SARANAC AVE
7301 SOUTH DOCKE HIGHWAY
WEST PALM BEACH FL 33409
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1984

3a. Date of Last Report

06/01/1994

4. FEI Number

59-2531694

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

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

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOELET, GLORIA
2611 SARANAC AVE
WEST PALM BEACH FL 33409

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PTD	GOELET, GLORIA	2611 SARANAC AVE	W. PALM BCH FL
SD	TAYLOR, ANNE	1768 S. OCEAN BLVD	PALM BCH FL
VPD	BENNETT-MCGRADY, COLLEEN	1800 FLORIDA AVE	WEST PALM BEACH FL
D	TURNER, HELEN	430 29TH ST.	WEST PALM BEACH FL
D	KENDER, JOHN	4741 SOUTHERN BLVD	WEST PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	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 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Colin A. Pres, April 29, 1995