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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUI 1. Corporation	MENT # N0491	18 (1)				
THE FLORIDA NATIONAL PAVILION, INC.					1 30 THINE CHI 40 HI AND INDEN INDEN INDEN INDEN AND AND AND AND AND AND AND AND AND AN		
Principal Place	e of Business	Mailing Address					
	J.Fraser N. Park ave Le fl 32202	% Martha J.Fraser 100 Festival Park Ave Jacksonville Fl 32202					
					 Date Incorporated or Qualified 09/07/1984 	3a. Date of Last 03/27/	
2. Principal Pl	ace of Business	2a. Mailing Addres	ss		4. FFI Number 54-2477168) - 	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #.	etc.		J4 2477 100		Not Applicable 5 Additional
2		27			Certificate of Status Desired	, i	Required
City & State	ə	City & State			Election Campaign Financing Trust Fund Contribution	□ \$5.0	May Be
Zφ	Country 25	Zip 29	30	ountry	8. This corporation has liability for in	tangible tax under s	
1	9. Name and Address of Curre		30	T	Florida Statutes 10. Name and Address of New Re	Yes 🔼 No	
				81 Name		<u> </u>	
FRASER, MARTHA J. 100 FESTIVAL PARK AVE JACKSONVILLE FL 32202					oddress (P.O. Box Number is Not Acceptable)		
		9		83			
JACKSC	MAILLE PL 32202						
				84 City		85 Z	p Code
I1. Pursuant t or register familiar wit	to the provisions of Sections 617.050; ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	2 and 617.1508, Florida ida. Such change was a tion 617.0503, Florida S	Statutes, the ab uthorized by the tatutes.	pove-named corpor corporation's boar	ration submits this statement for the purp rd of directors. I hereby accept the appoin	ose of changing its intrient as registered	registered offic Lagent. Lam
SIGNATURE _	Signature, typed or printed namic of registered agen	r and title if applicable.	(NOTE Registers	ed Agent signature required	d when renstating:	ose of changing its intrinent as registered	
SIGNATURE _	Skyratore, typed or printed name of registered agen OFFICERS AN	rand titlent applicable. ID DIRECTORS	(NO L Registers	ed Agent signature required.		ose of changing its intrinent as registered DATE DERS AND DIRECTO	DRS IN 12
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