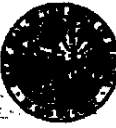
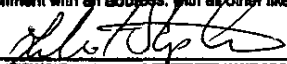


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90017 018 ****70.00

DOCUMENT # N11146			
1. Entity Name AMERICAN PRODUCTION AND INVENTORY CONTROL SOCIETY FLORIDA GULF COAST CHAPTER INC.			
Principal Place of Business 1209 24TH AVE. W. PALMETTO, FL 34221 US		Mailing Address 1209 24TH AVE. W. PALMETTO, FL 34221 US	
2. Principal Place of Business 512 44TH ST. CT. E Suite, Apt. #, etc.		3. Mailing Address 512 44TH ST. CT. EAST Suite, Apt. #, etc.	
City & State BRADENTON, FL		City & State BRADENTON, FL	
Zip 34208	Country USA	Zip 34208	Country USA
4. FEI Number 59-2408312		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUERCIO, PHILIP A 1209 24TH AVE. W. PALMETTO, FL 34221		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$81.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, DAN 1900 47TH TURNER EAST BRADENTON, FL 34203	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JENSEN, TINA 512 44TH ST. CT. E. BRADENTON, FL 34208	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROOKSHER, JIM 1001 13TH AVENUE EAST BRADENTON, FL 34206	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GENE, SOLTIS 1070 TECHNOLOGY DR. NOKOMIS, FL 34275	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOLK-TEZ, KATRIEN 4023 LANOOR CT. VENICE, FL 34293	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STEPHENS, LEE 1185 63ND ST. SARASOTA, FL 34234	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		1-29-04 941-379-0300 x1122	
SIGNATURE AND TYPED OR PRINTED NAME OF BRIDGE OFFICER OR DIRECTOR		Date Daytime Phone #	