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NONPROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🦼

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

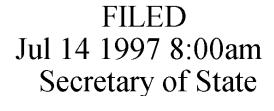
N12112

(1)

AMERICAN PRODUCTION AND INVENTORY CONTROL SOCIET Y, FLORIDA WEST COAST CHAPTER, INC.

Principal Place of Business

Mailing Address



|--|--|

C/O GERALD KITTY 514 HUMPHRIES ROAD SAFETY HARBOR FL 34821 US				5 S	C/O GERALD KILTY 514 HUMPHRIES ROAD SAFETY HARBOR FL 34695-4920 US				Date Incorporated or Qualifie 11/15/1985	j 3a.	Date of Last F 05/01/1 !		
2. Principal Pla		-		1	, Mailing Address					4. FEI Number			pplied For
21 010 KA		ARP	er	26	CO KAREN	CA	RPE	R		59-2243338			ot Applicable
Suite, Apt. 4 22 /2296	ARU	en s	AVENUE	27	Suite, Apt. #, etc. 12296 ARLE	NE	Av	ENUE		5. Certificate of Status Desired			Additional equired
City & State			ORIPA	28	City & State SEMINOLE	F	LOR		_	6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zíp		Cou		\vdash	Zip	Ĺ	Countr	•		B. This corporation has liability f		_	3. 199.032,
24 3464			Z. 5. dress of Curren	29	34642	30	U.	<u>>.</u>		Florida Statutes 10. Name and Address of New	Yes	No No	
	y, Harrie	and Au	areas or Curron	it Hogi	Storod Agent		8	1 Name				a Agoitt	
	BERALD MPHRIES I HARBOR		21				8; 8;	Street A	229		NUE	. 85 Zip	Çode
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, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature fequired when reinstating) Different													
12.			OFFICERS AND	D DIRE			13.			ADDITIONS/CHANGES TO OF	ICERS A		
TITLE	PD				DELETE	i	1.1 TITLE	B	PRI	ESIDENT		⊠ Change	Addition
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	v certify tha	at the Info	eilogua noitem	d with t	his filing does not a	alify fo			tated	in Section 119.07(3)(i), Florida Stati	ites. I furti	per certify that	the

I have a supplied with this mining does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, Turner 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.