SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $125 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $500)

NONPROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
1995 JUL 13 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N12967** **(8)**

1. Corporation Name
FLORIDA AMERICAN INSTITUTE OF BANKING, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2315 EDGEWATER DR PO BOX 540885 ORLANDO FL 32854-0085 US	2315 EDGEWATER DR PO BOX 540885 ORLANDO FL 32854-0085 US

3. Date Incorporated or Qualified: **12/10/1985**
3a. Date of Last Report: **02/21/1994**
4. FEI Number: **59-2816116** ☐ 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 ☐ **FILING FEE IS $61.25**
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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BARTON, GLEN
214 S BRONOUGH ST
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

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 n/a
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	M	1.1 TITLE		☐ Change ☑ Addition
NAME	DUNN, BARBARA	1.2 NAME		
STREET ADDRESS	2315 EDGEWATER DR	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	32804	
TITLE	C	2.1 TITLE		☐ Change ☑ Addition
NAME	THOMPSON, JOSEPH	2.2 NAME		
STREET ADDRESS	6600 TAFT STREET	2.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	33021	
TITLE	D	3.1 TITLE	D	☑ Change ☐ Addition
NAME	~~PALMER, MARVEEN~~	3.2 NAME	JEAN BOYER	
STREET ADDRESS	~~5740 STATE ROAD 484~~	3.3 STREET ADDRESS	760 N. CENTRAL AVE	
CITY-ST-ZIP	~~BELLEVIEW FL~~	3.4 CITY-ST-ZIP	UMATILLA, FL 32784	
TITLE	ED	4.1 TITLE		☐ Change ☑ Addition
NAME	BARTON, GLEN	4.2 NAME		
STREET ADDRESS	214 S BRONOUGH ST	4.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	4.4 CITY-ST-ZIP	32301	
TITLE	ST	5.1 TITLE		☐ Change ☑ Addition
NAME	JENKINS, SAM	5.2 NAME		
STREET ADDRESS	1549 RINGLING BLVD	5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOT FL	5.4 CITY-ST-ZIP	34230	
TITLE	D	6.1 TITLE		☐ Change ☑ Addition
NAME	SPENGLER, JOYCE	6.2 NAME		
STREET ADDRESS	1983 PGA BLVD.	6.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH GRDNS, FL	6.4 CITY-ST-ZIP	33408	

CR2E037 (3/95)

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 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: BARBARA A. DUNN Barbara A Dunn 7-5-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

Daytime Phone # (407) 237-5479

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