

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N14701 (9)

1. Corporation Name

THE FLORIDA SECTION OF THE AMERICAN NUCLEAR SOCIETY INCORPORATED



Principal Place of Business

Mailing Address

C/O JOHN WEAVER NR3B
15760 W POERLINE RD (FL POWER CORP)
CRYSTAL RIVER FL 34428-6708
US

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15760 W POWER LINE RD (FL POWER CORP)
CRYSTAL RIVER FL 34428-6708
US

3. Date Incorporated or Qualified
05/02/1986

3a. Date of Last Report
06/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

23-7289319

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEAVER, JOHN R
15760 W POWER LINE RD
CRYSTAL RIVER FL 34428

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 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

John R Weaver
Signature, typed or printed name of registered agent and title if applicable.

Chairman
(NOTE: Registered Agent signature required when reinstating)

2/14/96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETE
NAME WEAVER, JOHN R
STREET ADDRESS 15760 W POERLINE RD
CITY-ST-ZIP CRYSTAL RIVER FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME WUNDERLY, BLAIR P
STREET ADDRESS 15760 W POWERLINE RD
CITY-ST-ZIP CRYSTAL RIVER FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME MCKEE, PAUL F
STREET ADDRESS 15760 W POWERLINE RD
CITY-ST-ZIP CRYSTAL RIVER FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME AVERETT, MARK W
STREET ADDRESS 3201 84TH ST S
CITY-ST-ZIP ST PETERSBURG FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME AVERETT, MARK W
4.3 STREET ADDRESS 15760 W POWERLINE RD
4.4 CITY-ST-ZIP Crystal River, FL 34428

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John R Weaver
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96 (904) 795-6504
Date Daytime Phone

CR2E037 (12/95)