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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N1470

(9)

THE FLORIDA SECTION OF THE AMERICAN NUCLEAR SOCI TY INCORPORATED

Principal Place of Business

SIGNATURE:

Mailing Address

C/O JOHN WEAVER NR38 15760 W POERLINE RD (FL POWER CORP) CRYSTAL RIVER FL 34428-6708 C/O JOHN WEAVE NR38 15780 W POWER LINE RD (FL POWER CORP) CRYSTAL RIVER FL 34428 FILED Feb 06 1997 8:00am Secretary of State



CRYSTAL RIVER FL 34428-6708		CRYSTAL RIVER FL 34428 US			•	3. Date incorporated or Qualified 05/02/1986	3a. Date of Last 02/19/1		
A Driver at Dr	and Durings	Ba Mailing Address				4. FEI Number			
	ace of Business		. Mailing Address			23-7289319		Applied For	
Suite, Apt. 1	hn Wearer NTO2	26 C/O John V	C/U John Weaver NTO2 Suite, Apt. #, etc.				60 75	Not Applicable	
22 15760 W Powerline Rol 27						5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State (FI Power Corp) City & State						6. Election Campaign Financing		May Be	
23 Crystal River, j=1. 28 Zip Country Zip			.			Trust Fund Contribution	Added	to Fees	
Zip Country Zip 24 34428-6708 25 V S 29 34428-6708 30				8. This corporation has liability for intangible tax under s. 199.0 Florida Statutes		s. 199.032,			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
			[8	F1 N	ame				
WEAVER, JOHN R 15760 W POWER LINE RD CRYSTAL RIVER FL 34428				82 Street Address (P.O. Box Number is Not Acceptable)					
				out of the same of					
				13					
			,	4 Ci	itu		85 Zip	Code	
			. [`` ``	''		FL " "	, 0000	
office or re agent. I ar	o the provisions of Sections 617.0502 agistered agent, or both, in the State o in familiar with, and accept the obligati	f Florida. Such change was:	authorized	by the	med corp corporat	oration submits this statement for the pur tion's board of directors. I hereby accept t	pose of changing the appointment a	its registered is registered	
SIGNATURE _	Signature, typed or printed name of registered agent	and title il applicable. (NOI	E: Registered /	geni siç	nature requir	red when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	
TITLE	CD	☐ DELETE	. 1.1 TITL	E			☐ Change	Addition	
NAME	WEAVER, JOHN R		1.2 NAM	E	1				
STREET ADDRESS	15760 W POERLINE RD		1.3 STR	EET ADO	RESS				
CHTY-ST-ZIP	CRYSTAL RIVER FL		1.4 CITY	'-ST-ZIF	د	<u> </u>			
TITLE	VD	☐ DELÊTE	2.1 TITL	£		*;	Change	☐ Addition	
NAME	**************************************		2.2 NAM	2.2 NAME					
STREET ADDRESS	15760 W POWERLINE RD		2.3 STREET ADDRESS		ress				
CITY-ST-ZIP	CRYSTAL RIVER FL	·····	2. 4 CIT	2. 4 CITY-ST-ZIP			·		
TITLE	ΤD	☐ DELETE 3.1 T		3.1 TITLE			Change	Addition	
NAME	MCKEE, PAUL F		3.2 NAME		- 1				
STREET ADORESS	15760 W POWERLINE RD	3.3 \$		3.3 STREET ADDRESS					
CITY-ST-ZIP	CRYSTAL RIVER FL		3.4. CIT	Y-ST-ZI	P				
TITLE	S	DELETE	4.1 TITL	E			Change	Addition	
NAME	AVERETT, MARK W.		4. 2 NAME		ļ				
STREET ADDRESS	15760 W POWERLINE ROAD		4.3 STREET ADDRESS		RESS				
CITY-ST-ZIP	CRYSTAL RIVER FL		4.4 CITY	- ST - ZH	,				
TITLE		☐ DELETE	5.1 TITL	E	}		☐ Change	Addition	
NAME			5.2 NAM	1E					
STREET ADDRESS			5.3 STR	EET ADD	ress				
CITY - ST - ZIP			5.4 CfTY	- ST - ZIF	٠				
TITLE		☐ DELETE	6.1 TITL	E			☐ Change	Addition	
NAME			6.2 NAM	Œ					
STREET ADDRESS			6.3 STR	EET ADO	ress				
CITY - ST - ZIP	<u></u>		6.4 CITY	'-ST-ZIF					
information I am an of	n indicated on this annual report or su	pplemental annual report is t he receiver or trustee empoy	true and ac vered to ex	curate	e and that	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal e rt as required by Chapter 617, Florida Sta	effect as if made u	inder oath: that	

Paul 9. DME DECOUITAND F. MEKER 1/30/97 352-795-7181