

FILE NOW: FILING FEE IS \$61.25

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Jul 02 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N15306** (6)  
1. Corporation Name  
**CANADIAN AMERICAN BUSINESS ASSOCIATION, INC.**



Principal Place of Business <b>933 LEE RD SUITE 400 ORLANDO FL 32810</b>	Mailing Address <b>933 LEE RD SUITE 400 ORLANDO FL 32810</b>
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3. Date Incorporated or Qualified <b>06/10/1986</b>	4. FEI Number <b>59-2954907</b>	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 <b>555 ARAPAHO TRAIL</b> Suite, Apt. #, etc. 22 City & State 23 <b>MAITLAND, FL 32251</b> Zip 24 <b>32251</b> Country 25 <b>USA</b>	2a. Mailing Address 26 <b>555 ARAPAHO TRAIL</b> Suite, Apt. #, etc. 27 City & State 28 <b>MAITLAND, FL</b> Zip 29 <b>32251</b> Country 30 <b>USA</b>
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5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>RICHART, JOANNE C/O SOUTHEASTERN INVESTMENT PROPERTIES 933 LEE RD., SUITE 400 ORLANDO FL 32810</b>	
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10. Name and Address of New Registered Agent 81 Name <b>JOANNE RICHART</b> 82 Street Address (P.O. Box Number Is Not Acceptable) <b>555 ARAPAHO TRAIL</b> 83 84 City <b>MAITLAND</b> FL 85 Zip Code <b>32251</b>	
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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 *Joanne L. Richart - President* DATE *April 25, 1998*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD RICHART, JOANNE 933 LEE RD #400 ORLANDO FL</b> <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD JOHNSON, D P 635 W MICHIGAN ORLANDO FL</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD POMERANTZ, SUSAN 3419 TRENTWOOD BLVD ORLANDO FL</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD PATEL, VIPUL 200 S ORANGE AVE ORLANDO FL</b> <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>PD, VP, S, T</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>LEE BENNETT - DIRECTOR</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>201 E. PINE - SUITE 1200 ORLANDO, FL 32801</b>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>TRACEY STOCKWELL - DIRECTOR</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>UNIVERSAL STUDIOS FLORIDA 1000 UNIVERSAL STUDIOS PLAZA ORLANDO, FL 32819</b>
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing 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 *Joanne L. Richart - President* DATE *April 25, 1998* *402-642-0850*

CR2E037 (10/97)