

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY -1 AM 10:07

DOCUMENT # N15411 (4)

1. Corporation Name
NATIONAL CONFERENCE
INTERNATIONAL BROTHERHOOD OF FIREMEN & OILERS, LOCAL 1220 HOLDING, INC.



Principal Place of Business Mailing Address
% FREDERICK D. WINTERS
1243 CENTRAL AVENUE
ST. PETERSBURG FL 33705

3. Date Incorporated or Qualified

06/13/1986

4. FEI Number

23-7347454

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 Frederick D. Winters

Frederick D. Winters 3-17-98

Signature, typed or printed name of registered agent and title if applicable

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME WINTERS, FREDRICK D
STREET ADDRESS 664 63RD STREET S.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE STD
NAME PICKARD, WILLIAM A
STREET ADDRESS 739 22ND STREET N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE T
NAME MOLODY, JOSEPH A
STREET ADDRESS 11955 3RD STREET E., APT 4
CITY-ST-ZIP TREASURE ISLAND FL

TITLE T
NAME JENKINS, JOHN J
STREET ADDRESS 1927 30TH AVENUE N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE T
NAME FLING, ROGER
STREET ADDRESS 200 72ND AVENUE N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE VP
NAME ROBINSON, ROBERT L
STREET ADDRESS 6730 15TH AVENUE S.
CITY-ST-ZIP ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
100002557701-5
-06/12/98--01003-004
*****61.25 *****61.25

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

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

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
sp 5/29/98

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: William A. Pickard 3-17-98

CR2E037 (10/97)