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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

N23674

(7)

THE NORTHEAST FLORIDA CHAPTER OF NATIONAL SPA & POOL INSTITUTE, INC.

CARIS. MARILYN ROBBIUS, KELLEY P. O. BOX 454 PONTE VEDRA BEACH FL 32004  Mailing Address  GARIS. MARILYN ROB P. O. BOX 454 PONTE VEDRA BEACH FL 32004					KALEY			
US US				ACH FL 32004		3. Date Incorporated or Qualifination 12/01/1987		f Last Report /20/1995
_1			2a. Mailing Address 26			4. FEI Number 59-2856307		Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc	·	·	09 200001		Not Apolicable
2			27			5. Certificate of Status Desired		8.75 Additional Fee Required
City & State	e		City & State			6. Election Campaign Financing Trust Fund Contribution	. 1	5.00 May Be
Zip	Count	ry	Zip	Cour	ntry	This corporation has liability		Added to Fees
4	25		29	30		Florida Statutes	Yes X No	
	9. Name and Addr	ess of Current R	Registered Agent			10. Name and Address of Ne	w Registered Age	nt
0.4.010	LAAMUAAA				Name Ro	BBINS KELLEY		
	MARILYN			ľ	82 Street Addre	ss (P.O. Box Number is Not Accer	otable)	
	OSPREY AVE			ļ	-559	G. Ocrowy Ave P	O.BOX 4	54
SARASC	OTA FL 34236				B3		<b>-</b> .	32004
				Ţ	B4 City PON	TE VEDRA BOH,	FL 85	
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					e-named corpora orporation's board	tion submits this statement for the of directors. I hereby accept the a	purpose of changing	g its registered offic
restribes Trie	P. M. CD	ations of Section	617.0503, Florida Statu	JIES.	•		2/12/6	i
IGNATURE 🦞	Signature, typed of printed name	o , Q	the facebooks	icto)			0/12/9	φ :
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SIGNATURE: P. G. Set PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR ON PRESIDENT 2/14/96 904