FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N31128

1. Corporation Name

THE AUSONIAN SOCIETY, INC.

| Principal Place of Business | 5 |
|--|---|
| 2827 NORTHWOOD CIRCLE SARASOTA FL 34234 | |

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

ИS

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

2827 NORTHWOOD CIRCLE SARASOTA FL 34234

US

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FILED Apr 23, 1999 8:00 am § Secretary of State

04-23-1999 90261 035 ****61.25

|--|--|--|

3. Date Incorporated or Qualifed

NOT APPLICABLE

03/09/1989

4. FEI Number

| 28 29 29 30 30 Trust Fund Contribution S.5.00 May Be Added to Fees S.2.00 May Be | City & State | ê | City & State | | | | 5. Certificate of State | us Desired | | \$0.73 A | |
|--|-------------------------------------|--|------------------------------|------------------|-----------|------------------|---|----------------------------------|--|--------------------------------|------------------------|
| 30 Trust Fund Contribution Additor of Peece 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Surprise Address (P.O. Box Number is Not Acceptable) 14. Furnament to the provisions of Sections 617,0502 and 617,1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Sections 617,0503. Floridal Statutes. 15. SIGNATURE 16. OFFICERS AND DIRECTORS IN 12. 17. SUBMIT OFFICERS AND DIRECTORS IN 12. 18. OFFICERS AND DIRECTORS IN 12. 18. OFFICERS AND DIRECTORS IN 12. 19. OFFICERS AND DIRECTORS IN 12. 10. OFFICERS AND DIRECTORS IN 12. 11. TILL 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. NAME 16. STREET ADDRESS 17. STATE IN IT. 18. SARASOTA FL 19. DELETE 11. TILL 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. NAME 16. STREET ADDRESS 17. STATE ADDRESS 18. STREET ADDRESS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. NAME 10. DELETE 11. TILL 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OTT-ST-2P 15. NAME 16. OTT-ST-2P 16. OTT-ST-2P 16. OTT-ST-2P 17. STAREST ADDRESS 17. STREET ADDRESS 18. | 23 | | 28 | | | | U. Octalodio of Giza | | | Fee Rec | quired |
| 9. Name and Address of Current Registered Agent State | Zip | Country | Zip | | ntry | | 6. Election Campai | gn Financing | П | | • |
| CERMINARA, FRANCES A 2827 NORTHWOOD CIRCLE SARASOTA FL 34234 11. Pursuant to the provisions of Sections \$17,0502 and \$17,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, or both, and accept, the obligations of, Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILE OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILE SIRECT ADDRESS SITEST ADDRESS SITEST ADDRESS SITEST A, THOMAS SITEST | 24 | 25 | 29 | 30 | | | | | | | Fees |
| SET NORTHWOOD CIRCLE SARASOTA FL 34/234 S4 | | 9. Name and Address of Current F | Registered Agent | | | | 10. Name and Add | ress of New R | tegistered A | lgent | |
| 2827 NORTHWOOD CIRCLE SARASOTA FL 34234 B4 City FL 85 Zip Code 11. Drawantie 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 agent, and accept the obligations of Section 617,0502 and 617,1508, Florida Statutes. 12. Drawantie with, and accept the obligations of Section 617,0503, Florida Statutes. SIGNATURE Signature, byte or printed rating of registered agent and tills favigations. FROME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. The printed agent is a statute with a statute and tills favigations. 16. The printed agent is a statute and tills favigations. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. THE DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. THE DIRECTOR IN 12. 18. THE DIRECTORS IN 12. 18. THE DIRECTOR IN 1 | | | | | 81 1 | Name | | | | | |
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| SARASOTA FL 34234 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the optiopotament are registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the optiopotament are registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the optiopotament are registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the optiopotament are registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the optiopotament are registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 12. | | | | | | | | | | | |
| State City FL State | | | | | 83 | | | | | | |
| ### Page 11 Pressant 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 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, 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 and to registered agent agent and to registered agent agen | ON MOO! | A 1 L 01201 | | | 84 (| City | | | | 85 Zip C | ode |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, Signature, the composition 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 | المراجعة المراجعة المراجعة | the state of the s | | | | • | | | | ' | |
| Signature sequence when required agent and title if applicable. (NOTE-Registered Agent agent agent agent and title if applicable. (NOTE-Registered Agent age | 11. Pursuant office or r agent. I a | to the provisions of Sections 617.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio | Florida. Such change wa | as authorized | by the | amed corporation | oration submits this staten's board of directors. | tement for the I hereby accep | purpose of on the purpoint the appoint the | changing its i tment as reg | registered jistered |
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| CITY-ST-ZIP SARASOTA FI. 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.9 (ATRIVITY Project Statutes of the certify that the information | STREET ADDRESS |) · · · · · | | 6.3 ST | REETAD | DORESS 2 | 827 MODDING | 70 D GT1 | יי דיים | | |
| 14: I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 408 (478)(ii) Plorida Statutes of Uther certify that the information | CITY-ST-ZIP | CADACOTA EL | | 6.4 Cf | ry-st-z | | | | | | |
| | 14. I hereby o | certify that the information supplied with | this filing does not quality | fy for the exer | mption | stated in | Helich Pie.07(8)(i) Plo | rida Statutes.« | if fürther cert | ify that the in | nformation 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, with all other like empowered.

SIGNATURE:

Applied For

\$8.75 Additional

Not Applicable