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Apr 14 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N34902** (9)

1. Corporation Name

**BRANCH 1477-NATIONAL ASSOCIATION OF LETTER CARRIERS, INC.**

Principal Place of Business

Mailing Address

C/O JUSTIN C. JOHNSON ESQUIRE  
1135 SOUTH PASADENA AVENUE SUITE 107  
ST. PETERSBURG FL 33707

C/O JUSTIN C. JOHNSON ESQUIRE  
1135 SOUTH PASADENA AVENUE SUITE 107  
ST. PETERSBURG FL 33707-2883

3. Date Incorporated or Qualified  
**10/26/1989**

3a. Date of Last Report  
**08/08/1996**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number  
**59-6138448**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, JUSTIN C. ESQUIRE  
1135 SOUTH PASADENA AVENUE SUITE 107  
ST. PETERSBURG FL 33707

81 Name

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

83

84 City

**FL**

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE  
NAME BOURLON, JOHN W.  
STREET ADDRESS 12714 83RD AVENUE. N.  
CITY-ST-ZIP SEMINOLE FL

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME ELLIOTT, ORVILLE D.  
1.3 STREET ADDRESS 101 78th Avenue N.E.  
1.4 CITY-ST-ZIP St. Petersburg, FL 33702

TITLE VD ☐ DELETE  
NAME ELLIOTT, ORVILLE D.  
STREET ADDRESS 101 78TH AVENUE N.E.  
CITY-ST-ZIP ST. PETERSBURG FL

2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME STROUP, LESLIE  
2.3 STREET ADDRESS 9098 - 108th Avenue North  
2.4 CITY-ST-ZIP Largo, FL 33777-1121

TITLE D ☐ DELETE  
NAME STROUP, LESLIE  
STREET ADDRESS 9098 108TH AVENUE NORTH  
CITY-ST-ZIP LARGO FL

3.1 TITLE D ☒ Change ☐ Addition  
3.2 NAME NORTHUP, KEITH L., SR.  
3.3 STREET ADDRESS 8696 - 78th Place North  
3.4 CITY-ST-ZIP Seminole, FL 33777-4207

TITLE S ☐ DELETE  
NAME NORTHUP, KEITH L.  
STREET ADDRESS 8696 78TH PLACE NORTH  
CITY-ST-ZIP SEMINOLE FL

4.1 TITLE S ☒ Change ☐ Addition  
4.2 NAME STRZYZYNSKI, HAROLD  
4.3 STREET ADDRESS 801 83rd Avenue North #226  
4.4 CITY-ST-ZIP St. Petersburg, FL 33702-3549

TITLE T ☐ DELETE  
NAME HENSCHEN, JOSEPH A  
STREET ADDRESS 1934 CAESAR WAY SOUTH  
CITY-ST-ZIP ST. PETERSBURG FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

14. I do 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: *Orville D. Elliott* (ORVILLE D. ELLIOTT 3/31/97 (813) 531-1477)

CR2E037 (9/96)