

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N40193** (7)

1. Corporation Name

FLORIDA FRANCHISE ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% RUDNICK & WOLFE
101 E. KENNEDY BLVD., SUITE 2000
TAMPA FL 33602-5133

% RUDNICK & WOLFE
101 E. KENNEDY BLVD., SUITE 2000
TAMPA FL 33602-5133

3. Date Incorporated or Qualified

09/26/1990

3a. Date of Last Report

02/06/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

4. FEI Number

59-3032090

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

BEYER, DAVID A.
% RUDNICK A. WOLFE
101 E. KENNEDY BLVD., SUITE 2000
TAMPA FL 33602

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 **STD** ☐ DELETE
NAME **BEYER, DAVID A.**
STREET ADDRESS **101 E. KENNEDY BLVD.**
CITY-ST-ZIP **TAMPA FL**

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE **PD** ☐ DELETE
NAME **GORDON, KENNETH A.**
STREET ADDRESS **6860 GULFPORT BLVD. S.**
CITY-ST-ZIP **ST. PETERSBURG FL**

21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS **2502 Rocky Point Drive, Suite 660**
24 CITY-ST-ZIP **Tampa, Florida 33607**

TITLE **VD** ☐ DELETE
NAME **MCGUIRE, KENNETH J.**
STREET ADDRESS **3835 SHAMROCK WEST**
CITY-ST-ZIP **TALLAHASSEE FL**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **MULLINS, MARK**
STREET ADDRESS **9000 CYPRESS GREEN DRIVE**
CITY-ST-ZIP **JACKSONVILLE FL**

41 TITLE ☐ Change ☒ Addition
42 NAME **David Hinze**
43 STREET ADDRESS **8000 N. Federal Highway**
44 CITY-ST-ZIP **Boca Raton, Florida 33487**

TITLE **D** ☐ DELETE
NAME **PERLYN, DONALD**
STREET ADDRESS **6300 N.W. 31ST AVENUE**
CITY-ST-ZIP **FT. LAUDERDALE FL**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **ELMER, DIANE**
STREET ADDRESS **8605 LARGO LAKES DR.**
CITY-ST-ZIP **LARGO FL**

61 TITLE ☐ Change ☒ Addition
62 NAME **Raja Jaghab**
63 STREET ADDRESS **13922 58th Street North**
64 CITY-ST-ZIP **Clearwater, Florida 34620**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

David A. Beyer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A. Beyer

Date

(813) 229-2111

Daytime Phone #

CR2E037 (12/95)

SUPPLEMENT TO 1996 CORPORATION ANNUAL REPORT

Corporation Name: **FLORIDA FRANCHISE ASSOCIATION, INC.**

Document #: **N40193 (7)**

12. **OFFICERS AND DIRECTORS (continued):**

7.1	Title	D
7.2	Name	Shelledy, Karen
7.3	Street Address	1000 Corporate Drive
7.4	City-St-Zip	Ft. Lauderdale, FL 33334

13. **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

8.1	Title	D	Addition
8.2	Name	Johnston, Robert P.	
8.3	Street Address	8406-G Benjamin Road	
8.4	City-St-Zip	Tampa, Florida 33624	