FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

N44887 DOCUMENT #
1. Corporation Name

(0)

THE CLAN PETER SOCIETY FOUNDATION, INC.

Principal Place of Business Mailing Address				I (MASIND) DIL ENDIN DIBBI (BIDI (DER))	881 81810 81811 85811 81811 81811 B1811 1981
510 VONDERBURG DRIVE SUITE 3000 BRANDON FL 33511		510 VONDERBURG DRIVE SUITE 3000 BRANDON FL 33511			
				3. Date Incorporated or Qualified 08/28/1991	3a. Date of Last Report 04/28/1995
2. Principal Place of Business 2a. M. 21 26		2a, Mailing Address 26		4. FEI Number 13-3633075	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
UNITED C	CORPORATE SERVICES INC.		82 Street Add	ress (P.O. Box Number is Not Acceptable	e)
801 NORTHEAST 167TH STREET					
SUITE 300			83		
NORTH N	IIAMI BEACH FL 33162		84 City		85 Zip Code
		00 15:7:500 Ft : 1 Ot 1			FL
or registere familiar with	a the provisions of Sections 617.03 ad agent, or both, in the State of Fikin, and accept the obligations of, Se	orida. Such change was authori:	zed by the corporation's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	intment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if applicable (N	OTE: Registered Agent signature require	od when reinstating?	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PD COMMON	DELETE	11 TITLE		Change Addition
NAME	PETER, EDWARD L.	CHITE SAAA	1 2 NAME		
STREET ADDRESS	510 VANDERBURG DRIVE, 3 BRANDON FL	SUITE 3000	13 STREET ADDRESS		
CITY-ST-ZIP	SD SD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE	Peter, Ruth	Clotter	2 2 NAME		
NAME STREET ADDRESS	510 VANDERBURG DRIVE,	SUITE 3000	2 3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		2 4 CITY - ST - ZIP		
TITLE	D	DELETE	31 TITLE		Change Addition
NAME	WARMFLASH, DAVID	_	3 2 NAME		
STREET ADDRESS	61 BROADWAY		3 3 STREET ADDRESS		
CITY - ST - ZIP	NEW YORK NY		3 4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET AODRESS		
CITY-ST-ZIP		Contro	4.4 CITY - ST - ZIP		Change Add's
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		<u> </u>
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I do hereb certify that oath; that	the information indicated on this a	ngual report or supplemental an reporation or the receiver or trust	rnished and does not qualify nual report is true and accur ee empowered to execute the	for the exemption stated in Section 119. ate and that my signature shall have the ais report as required by Chapter 617, Fig.	same legal effect as it made under

SIGNATURE:

SPONATURE AND TYPED OF PRINTED NAME OF PRINTING OFFICER OR DIRECTOR

4/18/96

212-383-5300

Daytime Phone #