FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N45341** **(7)**

1. Corporation Name

FLORIDA WEST COAST INTERNATIONAL AFFAIRS COMMISSION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
8191 COLLEGE PKWY #306 FT MYERS FL 33919	8191 COLLEGE PARKWAY STE. #306 FORT MYERS FL 33919-4100 US

3. Date Incorporated or Qualified: 09/25/1991
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-3106285 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under § 199.032, Florida Statutes* ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2033 MAIN STREET	26 2033 MAIN STREET
Suite, Apt. #, etc 22 #100	Suite, Apt. #, etc 27 #100
City & State 23 SARASOTA, FL	City & State 28 SARASOTA, FL
Zip 24 34237 Country 25 USA	Zip 29 34237 Country 30 USA

9. Name and Address of Current Registered Agent

CASWELL, CHRISTOPHER K
2033 MAIN ST, STE 600
SARASOTA FL 34237

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	11 TITLE	C	☐ Change ☐ Addition
NAME	CASWELL, CHRISTOPHER K	12 NAME	CASWELL, CHRISTOPHER K.	
STREET ADDRESS	2033 MAIN ST., #600	13 STREET ADDRESS	2033 MAIN STREET, #600	
CITY-ST-ZIP	SARASOTA FL 34237	14 CITY-ST-ZIP	SARASOTA, FL 34237	
TITLE	V	21 TITLE	V	☒ Change ☐ Addition
NAME	PEREZ, HIRAM	22 NAME	PAREIGIS, SUSAN	
STREET ADDRESS	801 E KENNEKY BLVD	23 STREET ADDRESS	2180 W. FIRST ST, SAXON HOUSE, #306	
CITY-ST-ZIP	TAMPA FL 33601	24 CITY-ST-ZIP	FT. MYERS, FL 33901	
TITLE	T	31 TITLE	T	☐ Change ☐ Addition
NAME	PAREIGIS, SUSAN	32 NAME	PAREIGIS, SUSAN	
STREET ADDRESS	2180 W. 1ST ST.,HOUSE 101	33 STREET ADDRESS	2180 W. FIRST ST, SAXON HOUSE, #306	
CITY-ST-ZIP	FT. MYERS FL 33901	34 CITY-ST-ZIP	FT. MYERS, FL 33901	
TITLE	S	41 TITLE	S	☒ Change ☐ Addition
NAME	PURVIS, CONNIE	42 NAME		
STREET ADDRESS	2296 ROYAL LANE	43 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 33962	44 CITY-ST-ZIP		
TITLE	D	51 TITLE	D	☐ Change ☐ Addition
NAME	BEYER, PATSY	52 NAME	BEYER, PATRICIA	
STREET ADDRESS	2000 TALL PINES DR 100	53 STREET ADDRESS	2200 TALL PINES DRIVE, #100	
CITY-ST-ZIP	LARGO FL 34641	54 CITY-ST-ZIP	LARGO, FL 34641	
TITLE	D	61 TITLE	D	☐ Change ☐ Addition
NAME	ENGEL, NANCY	62 NAME	ENGEL, NANCY	
STREET ADDRESS	P.O. BOX 321 N/A	63 STREET ADDRESS	700 8th AVENUE	
CITY-ST-ZIP	BRADENTON FL 34206	64 CITY-ST-ZIP	PALMETTO, FL 34221	

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)(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: Chris Caswell CHRIS CASWELL, CHAIRMAN 4/29/95 (813) 366-8100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0010443

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DIRECTORS (Continued)

D
ANDY GODDARD
401 EAST JACKSON STREET, SUITE 2100
TAMPA, FL 33602

D
JOHN WALSH
16110 AVIATION LOOP DRIVE
BROOKSVILLE, FL 34609

D
TOM GOLA
4111 LAND O'LAKES BOULEVARD, SUITE 305
LAND O'LAKES, FL 34639

D
CINDY FELTER
3200 BAILEY LANE, SUITE 162
NAPLES, FL 33942