## 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

DOCUMENT #
1. Corporation Name

N45721

(0)

NATIONAL HOT PEPPER ASSOCIATION, INC.

Principal Place	of Business	Mailing Address					
400 N.W. 20TH STREET WILTON MANORS FL 33311		400 N.W. 20TH STREET WILTON MANORS FL 33311					
					<ol> <li>Date Incorporated or Qualified 10/22/1991</li> </ol>	3a. Date of La 04/20/	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0296948		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	75 Additional
22		27			5. Certificate of Status Desired	Fe Fe	e Required
City & State		City & State			6. Election Campaign Financing	<b>\$5</b> .	.00 May Be
23		28			Trust Fund Contribution	Ade	ded to Fees
Zip	Country	Zip	Countr	У	8. This corporation has liability for in		s. 199.032,
24	25	29	30			Yes ☐ No	
	9. Name and Address of Current	Registered Agent		AT	10. Name and Address of New Re	gistered Agent	
			8	1 Name			
Rumin, Edward R.				2 Street A	Address (P.O. Box Number is Not Acceptable	9)	
2500 N. FEDERAL HIGHWAY							
SUITE 201				3			
FORT LA	UDERDALE FL 33305		8	4 City		B5 85	Zip Code
				'		FL	,
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florida Statute	es, the above	named co	rporation submits this statement for the purp	ose of changing it	s registered office
or registere familiar wit	ed agent, or both, in the State of Florida h, and accept the obligations of, Section	a. Such change was authorize on 617.0503, Florida Statutes	ed by the cor	poration s i	board of directors. I hereby accept the appoi	ntment as register	ed agent. i am
	, ,						
SIGNATURE _	Signature, typed or printed name of registered agent a	kt title if applicable (NO	IL Registered Ag	ent signature re	equired when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	TORS IN 12
TITLE	<b>D</b> DELETE		1.1 TiTLE		D	Chang	e XAddition
NAME	Payton, Elizabeth D.		1.2 NAM	E	GOLDBERG, BARNEY		
STREET ADDRESS	ADDRESS 400 N.W. 20TH STREET		1.3 STRE	et address	2331 N E 34 CT		
CITY-ST-ZIP	WILTON MANORS FL		14 CITY	-ST-ZIP	LIGHTHOUSE PT FL	33064	
TITLE	D DELETE		21 TITLE			Chang	e 🔲 Addition
NAME	PAYTON, ROBERT J.		2.2 NAM	E			
STREET ADDRESS	400 N.W. 20TH STREET		23 STRE	ET ADDRESS			
CITY-ST-ZIP	WILTON MANORS FL		2 4 CITY	-ST-ZIP			
TITLE	D DELETE		3.1 TITLE			Chang	e 🔲 Addition
NAME	MILLINOR, PEGGY		3.2 NAM	E			
STREET ADDRESS	1777 BENNINGFIELD DR SW			ET ADDRESS		•	
CITY-ST-ZIP	MARIETTA GA			-ST-ZIP			
TITLE	D	DELETE	4.1 TITLE			Chang	e 🔲 Addition
NAME	TAYLOR, STANLEY	_	4. 2 NAM				
STREET ADDRESS	3633 S.W. 16TH CT.			ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			- ST- ZIP			
TITLE			51 TITLE			Chang	e Addition
NAME			5.2 NAM				<del></del>
STREET ADDRESS	3181 NE 3RD AVE			ET ADDRESS			
	OAKLAND PARK FL			-ST-ZIP			
CITY-ST-ZIP TITLE	D	DELETE	61 TITLE			Chang	e Addition
1	Life of the same o						,
NAME	66 FALBY CT APT 711		6 2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	AJAX CA		6.4 CITY	-ST-ZIP			

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 or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PROSTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/40 954-565-447

R2E037 (12/9)