## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

Principal Place of Business

4280 GALT OCEAN DR SUITE 12-A

FT LAUDERDALE FL 33308

Suite, Apt. #, etc.

City & State

22

2. Principal Place of Business

N46459

Country

(6)

Mailing Address 4280 GALT OCEAN DR

FT LAUDERDALE FL 33308

Suite, Apt. #, etc.

2a. Mailing Address

City & State

SUITE 12-A

26

27

28

FLORIDA GOLD COAST CHAPTER OF THE MILITARY ORDER OF THE WORLD WARS, INC.

## **FILED** Jan 30 1998 8:00am Secretary of State

I CHRISTER BU DESIG GERE BERRE BURG 1816 1821 BERER BURG GIRLE BERER BERER BERER 1806

Yes Yes

7. Is this nonprofit corporation a homeowners association?

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified	
12/13/1991	
4. FEI Number	Applied For

65-0302889

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

24	25	29	30					i Property Tax			Yes	<u> Ц</u>	No	_
	Name and Address of Current Registered Agent						10. Name a	ind Address	of New Regis	stered A	gent			
				81	Nar	ne								7
WAYNE.	WAYNE, GEORGE H.				Stre	et Addres	ss (P.O. Boy I	Number is No	Accentable)					-
4280 GALT OCEAN DR			82	1 300	er vanie:	35 (F.O. DOX)	MULLING IS INC	. Acceptable)	,					
SUITE 12-A			83											
	FT LAUDERDALE FL 33308									,				_
11 5 105	PENDALL I E 00000			84	City	,				FL	85	Zip Co	ode	
11. Pursuant	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the					ed corpo	ration submit	s this stateme	nt for the puri	pose of c	changi	ng its i	egistered	
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 reinstaing)  DATE										_				
12.	T	CERS AND DIRECTORS		13.	nt sign	uure requied		NS/CHANGES			DIREC	TORS	IN 12	<b>⊣</b> [
TITLE	PD			1.1 TITLE				,			Cha		Additio	7
NAME	SUSSMAN, CHARLES	i S.		1.2 NAME									_	
STREET ADDRESS	20181 BACK NINE DE			1,3 STREET	ADDRE	35								3
CITY-ST-ZIP	BOCA RATON FL	476		1.4 CITY-S										
TITLE	TD		DELETE	2.1 TITLE	1-411				•		Chai	nge	Additio	
NAME	WAYNE, GEO H.	_		2.2 NAME		ł				_				
STREET ADDRESS	4280 GALT OCEAN D	R., #12-A		2.3 STREET	ADDRES	:s								
CITY-ST-ZIP	FT. LAUDERDALE FL	,		2. 4 CITY - S		~								
TITLE	SD			3.1 TITLE							Char	nge	Additio	1
NAME	ALGIG. WM B.			3.2 NAME		1								-
STREET ADDRESS	6616 SW 33RD STRE	ET		3.3 STREET	ADDRES	s								
CITY-ST-ZIP	MIRAMAR FL		I	3.4. CITY - S	T-ZIP	1								
TITLE	VPD			4.1 TITLE							Char	nge	Additio	7
NAME	TRICHILO, SAM			4. 2 NAME										
STREET ADDRESS	10924 NW 41 ST DRI	VΕ	l l	4.3 STREET	ADDRES	s								
CITY-ST-ZIP	CORAL SPRINGS FL		i i	4.4 CITY-ST	T-ZIP									
TITLE			DELETE	5.1 TITLE							Char	ige [	Addition	П
NAME			1	5.2 NAME										
STREET ADDRESS			i i	5.3 STREET	ADDRES	s								
CITY-ST-ZIP				5.4 CITY-\$1	r-ZIP									
TITLE		E	DELETE	6.1 TITLE							Cthar	ige (	Addition	П
NAME			1	6.2 NAME										-
STREET ADDRESS			<b>.</b>	6.3 STREET ,	ADDRES	s								
CITY-ST-ZIP				6.4 CITY - ST	T-ZIP									
14. I 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										7				
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Country