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 MAR 16 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N49074 (0)

1. Corporation Name

FLORIDA INTERNATIONAL MUSEUM, INC.

Principal Place of Business	Mailing Address
100 2nd Street No ~~201 SECOND AVE NORTH~~ ~~SUITE C~~ ST PETERSBURG FL 33701	~~SUITE 720 BARNETT TOWER~~ ONE PROGRESS PLAZA ST. PETERSBURG FL 33701 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/26/1992	3a. Date of Last Report: 04/14/1994
4. FEI Number: 59-3139888	☐ 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 S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26 Suite 720, Barnett Tower
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

JOHNSTON, W. RICHARD
~~SUITE 720 BARNETT TOWER~~
ONE PROGRESS PLAZA
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box(es) Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 W. Richard Johnston 2/8/95
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 ~~PDAS~~ Chairman NAME GALBRAITH, JOHN STREET ADDRESS 360 CENTRAL AVENUE CITY-ST-ZIP ST PETERSBURG FL	1.1 TITLE President & CEO ☐ Change ☒ Addition 1.2 NAME Joseph F. Cronin 1.3 STREET ADDRESS Suite 720, Barnett Tower 1.4 CITY-ST-ZIP St. Petersburg, FL 33701
TITLE ~~VTD~~ NAME KENNEDY, ROLAND STREET ADDRESS 19 FLOOR BARNETT TOWER CITY-ST-ZIP ST PETERSBURG FL	2.1 TITLE Trustee ☐ Change ☒ Addition 2.2 NAME Ira Mitlin 2.3 STREET ADDRESS 25 2nd Street North 2.4 CITY-ST-ZIP St. Petersburg, FL 33701
TITLE ~~D~~ NAME WILDER, GERALD STREET ADDRESS ONE TAMPA CITY CENTER CITY-ST-ZIP TAMPA FL	3.1 TITLE Secretary ☐ Change ☒ Addition 3.2 NAME Martin J. Mormile 3.3 STREET ADDRESS 100 2nd Avenue South, Suite 200 3.4 CITY-ST-ZIP St. Petersburg, FL 33701
TITLE EOD NAME FISCHER, DAVID J STREET ADDRESS 749 CAYA COSTA COURT CITY-ST-ZIP ST. PETERSBURG FL	4.1 TITLE V.P. & Trustee ☐ Change ☒ Addition 4.2 NAME John H. O'Hearn 4.3 STREET ADDRESS 2764 69th Avenue South 4.4 CITY-ST-ZIP St. Petersburg, FL 33712 X
TITLE ~~DVAK~~ Trustee NAME SIMMS, SHARON STREET ADDRESS 750 SECOND STREET NORTH CITY-ST-ZIP ST. PETERSBURG FL 33731	5.1 TITLE Trustee ☐ Change ☐ Addition 5.2 NAME L. Eugene Oliver, Jr. 5.3 STREET ADDRESS 150 2nd Avenue North # 300 5.4 CITY-ST-ZIP St. Petersburg, FL 33701
TITLE Trustee NAME Dr. Jack B. Critchfield STREET ADDRESS Barnett Tower CITY-ST-ZIP St. Petersburg, FL 33701	6.1 TITLE Trustee ☐ Change ☒ Addition 6.2 NAME Sharon Simms 6.3 STREET ADDRESS 4372 48th Avenue, South 6.4 CITY-ST-ZIP St. Petersburg, FL 33711

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: W. Richard Johnston 3/8/95 813 893 8507
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER OR DIRECTOR Date Daytime Phone #

0014449