

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PM 12:18

DOCUMENT # N49993

(1)

1. Corporation Name

FLORIDA INTERNATIONAL AFFAIRS FOUNDATION, INC.

Principal Place of Business

Mailing Address

**OFFICE OF THE GOVERNOR
THE CAPITOL
TALLAHASSEE FL 32399-0001
US**

**OFFICE OF THE GOVERNOR
THE CAPITOL
TALLAHASSEE FL 32399-0001
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1992

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0365695

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75

Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00

May Be

Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TURNBULL, NAT M.
OFFICE OF THE GOVERNOR
THE CAPITOL
TALLAHASSEE FL 32399-0001**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	ED
NAME	TURNBULL, NAT M
STREET ADDRESS	OFFICE OF THE GOVERNOR, THE CAPITOL
CITY - ST - ZIP	TALLAHASSEE FL 32399-0001
TITLE	D
NAME	DINGLE, JERRY
STREET ADDRESS	400 NORTH ASHLEY, STE. 2800
CITY - ST - ZIP	TAMPA FL
TITLE	D
NAME	LUNETTA, CARMEN
STREET ADDRESS	1015 N. AMERICA WY-PORT OF MIAMI
CITY - ST - ZIP	MIAMI FL
TITLE	D
NAME	STARLING, BRUCE
STREET ADDRESS	PO BOX 10000-DISNEY WORLD CO.
CITY - ST - ZIP	LAKE BUENA VISTA FL
TITLE	D
NAME	DUSSFALL, HONORABLE C
STREET ADDRESS	107 W. GAINES, STE 538 DEPT OF COMMERCE
CITY - ST - ZIP	TALL FL
TITLE	D
NAME	RANSON, CHARLES M
STREET ADDRESS	215 S. MONROE ST. - FIRST FLA BANK TOWER
CITY - ST - ZIP	TALL FL

11 TITLE	D	☐ Change ☒ Addition
12 NAME	Becker, Alan S.	
13 STREET ADDRESS	3111 Stirling Road	
14 CITY - ST - ZIP	Ft. Lauderdale, FL. 33310-9057	☒ Change ☐ Addition
21 TITLE	D	
22 NAME	Benson, Hayward	
23 STREET ADDRESS	P.O. Box 950	
24 CITY - ST - ZIP	Ft. Lauderdale, FL. 33302-0950	☒ Change ☐ Addition
31 TITLE	D	
32 NAME	Bolas, Joan	
33 STREET ADDRESS	2717 Colonial Blvd.	
34 CITY - ST - ZIP	Ft. Myers, FL. 39907	☒ Change ☐ Addition
41 TITLE	D	
42 NAME	Starling, Bruce	
43 STREET ADDRESS	2499 N. Orange Blossom Trail	
44 CITY - ST - ZIP	Kissimmee, FL. 34742-1150	☒ Change ☐ Addition
51 TITLE	D	
52 NAME	Maguire, Amelia R.	
53 STREET ADDRESS	701 Brickell Ave., Suite 3000	
54 CITY - ST - ZIP	Miami, FL. 33131	☒ Change ☐ Addition
61 TITLE	D	
62 NAME	Ranson, Charles M.	
63 STREET ADDRESS	325 West Park Avenue	
64 CITY - ST - ZIP	Tallahassee, FL. 32302	

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 110.07(3)(a), 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 incorporator, trustee or partner empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13, as applicable, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nat M. Turnbull, Jr.

4/5/95

94-922-0355