

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY - 1 AM 19: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N50357** (5)

1. Corporation Name
HAVANA MERCHANTS ASSOCIATION, INC.

Principal Place of Business Mailing Address
127 E. 7TH AVENUE HAVANA FL 32333

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/14/1992** 3a. Date of Last Report **02/04/1994**
4. FEI Number **59-3144357** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 **300 1st St. NW** 26 **SAME AS 2**
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 **HAVANA, FL** 28 City & State
24 **32333** 25 **GADSDEN** 29 Zip 30 Country

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

9. Name and Address of Current Registered Agent
COONROD, LORRAINE A. PAUL H. Morgan
127 E. 7TH AVENUE HAVANA FL 32333

10. Name and Address of New Registered Agent
B1 Name **PAUL H. Morgan III**
B2 Street Address (P.O. Box Number is Not Acceptable) **112 E 9th Ave**
B3
B4 City **Havana** FL B5 Zip Code **32333**

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 **PAUL H. Morgan III President** DATE **5/1/95**

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	COONROD, LORRAINE A
STREET ADDRESS	127 E. 7TH AVENUE
CITY - ST - ZIP	HAVANA FL 32333
TITLE	VD
NAME	MOTT, JACKIE
STREET ADDRESS	311 N MAIN ST
CITY - ST - ZIP	HAVANA FL
TITLE	SD
NAME	GOBER, LISA
STREET ADDRESS	211 FIRST STREET
CITY - ST - ZIP	HAVANA FL 32333
TITLE	TD
NAME	SHUMATE, JACKIE
STREET ADDRESS	106 E 7TH AVENUE
CITY - ST - ZIP	HAVANA FL 32333
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PAUL H. Morgan III	
1.3 STREET ADDRESS	112 E 9th AVENUE	
1.4 CITY - ST - ZIP	HAVANA FL 32333	
2.1 TITLE	VICE PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	JOHN SHAFER	
2.3 STREET ADDRESS	108 W 7TH AVENUE	
2.4 CITY - ST - ZIP	HAVANA, FL 32333	
3.1 TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	TERRI LOMBARDI	
3.3 STREET ADDRESS	300 1st ST N.W	
3.4 CITY - ST - ZIP	HAVANA FL 32333	
4.1 TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	KAREN K NUNING	
4.3 STREET ADDRESS	206 N MAIN ST	
4.4 CITY - ST - ZIP	HAVANA, FL 32333	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable, or as an attachment with an address.

SIGNATURE: **Paul H. Morgan III** DATE: **7/15/95** (Date Filing #) **681-9778**