

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 22 1997 8:00am
Secretary of State

DOCUMENT # N93000003285 (4)

1. Corporation Name

INTERNATIONAL HERITAGE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2579 SARNO ROAD
MELBOURNE FL 32935

P.O. BOX 360227
MELBOURNE FL 32936-0227



3. Date Incorporated or Qualified
07/22/1993

3a. Date of Last Report
03/04/1996

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3193611

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OSCHWALD, MARK H
2579 SARNO ROAD
MELBOURNE FL 32935

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME OSCHWALD, MARK H
STREET ADDRESS 2579 SARNO ROAD
CITY-ST-ZIP MELBOURNE FL 32935

DELETE

TITLE VPT
NAME OSCHWALD, SONJA M
STREET ADDRESS 2579 SARNO ROAD
CITY-ST-ZIP MELBOURNE FL 32935

DELETE

TITLE S
NAME LIPARI, DINA
STREET ADDRESS 360 SEAHORSE CIR. S.E.
CITY-ST-ZIP PALM BAY FL 32909

DELETE

TITLE D
NAME BARNETT, STEVEN
STREET ADDRESS 110 UNIVERSITY PARK DRIVE
CITY-ST-ZIP WINTER PARK FL 32792

DELETE

TITLE D
NAME HANEY, ED
STREET ADDRESS 1800 WOODLAKE VILLAGE 104
CITY-ST-ZIP PALM BAY FL 32906

DELETE

TITLE D
NAME JOHNSON, ANDY
STREET ADDRESS 4 N. GLENWOOD STREET
CITY-ST-ZIP ORLANDO FL 32803

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE T
2.2 NAME OSCHWALD, SONJA M.
2.3 STREET ADDRESS 2579 SARNO RD.
2.4 CITY-ST-ZIP MELBOURNE, FL. 32935

Change Addition

3.1 TITLE S
3.2 NAME NANCY MORISSETTE
3.3 STREET ADDRESS 6253 Fay BLVD.
3.4 CITY-ST-ZIP PT. ST. JOHNS, FL. 32937

Change Addition

4.1 TITLE VP
4.2 NAME BARNETT, STEVEN D.
4.3 STREET ADDRESS 110 UNIVERSITY PARK DR.
4.4 CITY-ST-ZIP WINTER PARK, FL. 32792

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE D
6.2 NAME Angie Raghunandan
6.3 STREET ADDRESS PO BOX 61993 1785 Highway 91
6.4 CITY-ST-ZIP Palm Bay, FL. 32906-1993 32907

Change Addition

14. I do 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 6019590

CR2E037 (9/96)