FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

<u>1996</u>

DOCUMENT # N9300003570 (9)

FLORIDA GEOGRAPHIC SOCIETY, INC.

Principal Place of Business Mailing Address						1 (BELLIE) AIR (DIES 1111) SELLE BRICK	10111 06411 00186 II	iği üttal	(40)(40)(100)
2741 FOREST PKWY N LARGO FL 34641		2741 FOREST PKWY I LARGO FL 34641	2741 FOREST PKWY N LARGO FL 34641						
						3. Date Incorporated or Qualified 08/05/1993	3a. Date o	of Last 6	
2. Principal Pla 21	ace of Business	2a. Mailing Address 26				4. FEI Number 59-3211781	Applied For Not Applicable		
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State)	City & State				6- Election Campaign Financing	<u>-</u>		May Be
23		28	28			Trust Fund Contribution			to Fees
Zip				Country		8. This corporation has liability for it			
24	25 29 30 9. Name and Address of Current Registered Agent		30	<u>)</u>		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curre	nt Hegistered Agent		81	Name	10. Name and Address of New H	agistered Age	nı	
DADVC	MADION			L					
PARKS, 1 2480 E E				82	Street Ad	ddress (P.O. Box Number is Not Acceptable	e)		
UNIT C-1				83			······································		
LARGO I	•								<u> </u>
D1100 1				84	City		FL 8	5 Zip	Code
or register	ed agent, or both, in the State of Flor	ida. Such change was authori	ized by the	oove-i	named corp coration's b	poration submits this statement for the purporal of directors. I hereby accept the appo	pose of changir pintment as regi	ng its re	egistered office agent. I am
familiar wit	th, and accept the obligations of, Sec	tion 617.0503, Florida Statute	98.						
SIGNATURE	Signature, typed or printed name of registered ager	nt and ritie if annicable (N	IOTE: Begister	ed Ager	nt signature regi	uired when reinstating):	DATE		
12.		ID DIRECTORS	13		ii sigrita a raq	ADDITIONS/CHANGES TO OFF		RECTO	RS IN 12
TITLE	PTD	DELETE	11	TITLE				hange	Addition
NAME	LYNCH, DANNETTE D		12	NAME					
STREET ADDRESS	2741 FOREST PKWY N.		13	STREET	ADDRESS				
CITY-ST-ZIP	LARGO FL 34641		1.4 CHTY		S1 - ZIP				
TITLE			2 1 TITLE			□ c	hange	Addition	
NAME	LANGHOLZ, MARY G		22	NAME					
STREET ADDRESS	7 CLEARVIEW DR.		2.3	STREE	T ADDRESS				
CITY-ST-ZIP	SAFETY HARBOR FL 34695		2 4 CITY-ST-		\$1-ZIP		F-1.0		- 122°
TITLE	D DELETE			TITLE			ΓJC	hange	☐ Addition
NAME	KENNEY, CELESTE			NAME					
STREET ADDRESS	1400 EAST AVE ROCHESTER NY 14610		l l	-	T ADDRESS				
C+TY-ST-ZIP TITLE	ROCHESTER IVI 14010	□DELETE		TITLE	ST-ZIP		— Fic	hange	☐ Addition
NAME				NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP			- 1		ST-ZIP				
TITLE		DELETE		TITLE				hange	☐ Addition
NAME			52	NAME					
STREET ADDRESS			53	STREE	T ADDRESS				
CITY-\$T-ZIP			5.4	CITY-:	ST-ZIP				
TITLE		□DELETE	61	TITLE				Change	Addition
NAME			62	NAME					
STREET ADDRESS			63	STREE	T ADDRESS				
CITY-ST-ZIP	l			CITY-			07/0/// 5: ::	<u> </u>	14 . 0
certify that	it the information indicated on this and	nual report or supplemental an poration or the receiver or trust	nnual repor t ee e mpov	t is tr	ue and acc	fy for the exemption stated in Section 119 urate and that my signature shall have the this report as required by Chapter 617, Fil	same legal effe	ect as if	f made under

SIGNATURE

Mary Y Danghales

Quecon 4/22/96 · 8/3/

CR2E037 (12/95)

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