

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N93G00003582 (4)

1. Corporation Name

FOUNDATION FOR THE ADVANCEMENT OF MESOAMERICAN STUDIES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 10:48

Principal Place of Business

Mailing Address

268 S SUNSET BLVD
CRYSTAL RIVER FL 34429

268 S SUNSET BLVD
CRYSTAL RIVER FL 34429

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3195520

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

BELOFF, DONN ESO
2255 GLADES RD
SUITE 340W
BOCA RATON FL 33431

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DCP
RANIERI, LEWIS S.
225 N. HEWLETT AVENUE
MERRICK NY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DVP
RANIERI, MARGARET
225 N. HEWLETT AVENUE
MERRICK NY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GOLDSTEIN, MARILYN DR.
259 SCHENCK AVENUE
GREAT NECK NY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DT
BARBERA, ELIZABETH
171 NATHAN DRIVE
NORTH BRUNSWICK NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DS
BARDLEY, SANDRA NOBLE
10976 COVE HARBOR DRIVE
CRYSTAL RIVER FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
REENTS-BUDET, DORIE
425 CAROLINA CIRCLE
DURHAM NC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
This is a correction of a typo.
259 Schenck Avenue

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
THE FOLLOWING TWO ENTRIES
ARE NOT CHANGES OR ADDITIONS, BUT
CORRECTIONS OF TYPO'S MADE BY THE STATE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
DS
BARDLEY, SANDRA NOBLE
10976 COVE HARBOR DRIVE
CRYSTAL RIVER, FL 34428

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
D
REENTS-BUDET, DORIE
425 CAROLINA CIRCLE
DURHAM, NC 27707

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 199.07(8)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEWIS S. RANIERI, DIRECTOR, CHAIRMAN AND PRESIDENT

4/26/95

Date

(516) 745-6644

Daytime Phone #

Foundation for the Advancement of Mesoamerican Studies Inc.

State of Florida

Annual Corporation Report, 1995

Item 12. Officers and Directors (continued)

7.1 Title: Director
7.2 Name: Kerr, Barbara
7.3 Street Address: 14 West 17th Street, Apartment 2S
7.4 City, State, Zip: New York, New York 10011

8.1 Title: Director
8.2 Name: Kerr, Justin
8.3 Street Address: 14 West 17th Street, Apartment 2S
8.4 City, State, Zip: New York, New York 10011