

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 20, 1999 8:00 am**  
**Secretary of State**

04-20-1999 90200 006 \*\*\*\*61.25

**DOCUMENT # N93000003582**

1. Corporation Name

**FOUNDATION FOR THE ADVANCEMENT OF MESOAMERICAN S  
TUDIES, INC.**

Principal Place of Business

268 SOUTH SUNCOAST BLVD  
CRYSTAL RIVER FL 34429

Mailing Address

268 SOUTH SUNCOAST BLVD  
CRYSTAL RIVER FL 34429



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/09/1993

4. FEI Number

59-3195520

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

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYES STREET, SUITE 105  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

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

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

TITLE DT  
NAME BARBERA, ELIZABETH  
STREET ADDRESS 1736 DANNET PLACE  
CITY-ST-ZIP EAST MEADOW NY 11554 ☐ DELETE

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME Kerr, Barbara  
1.3 STREET ADDRESS 14 West 17th St., Apt. 2S  
1.4 CITY-ST-ZIP New York, New York 10011

2.1 TITLE D ☐ Change ☒ Addition  
2.2 NAME Kerr, Justin  
2.3 STREET ADDRESS 14 West 17th Str, Apt. 2S  
2.4 CITY-ST-ZIP New York, New York 10011

3.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME Diehl, Richard  
3.3 STREET ADDRESS 1214 Wakefield Drive  
3.4 CITY-ST-ZIP Tuscaloosa, AL 35405

4.1 TITLE D ☒ Change ☐ Addition  
4.2 NAME Reents-Budet, Dorie  
4.3 STREET ADDRESS 2211 Meade Lane  
4.4 CITY-ST-ZIP Durham, NC 27707

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

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99

Date

Daytime Phone #

CR2E037 (11/98)