FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996
1000

N9400001236 (8) DOCUMENT #

THE ELECTRIC BOAT ASSOCIATION OF THE AMERICAS, I NÇ.

Principal Place of Business



Thirtipart Root of Eddiness		Maining Address			
360-1 PALM DRIVE NAPLES FL 33962		360-1 PALM DRIVE NAPLES FL 33962			
				3. Date Incorporated or Qualified 03/14/1994	3a. Date of Last Report 05/01/1995
2. Principal Place of Busin	TRACE CIRCLE	2a. Mailing Address 26 Po. Box 4	151	4. FEI Number 65-0470765	Applied For
Suite, Apt. #, etc.	TRACE CIRCLE	Suite, Apt. #, etc.	101		Not Applicable
22 205		27 —	··	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State 23 DeeRfield	Beach	City & State 28 Deefield 1	Beach	Election Campaign Financing Trust Fund Contribution	□ \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	tangible tax under s. 199.032,
24 33441	25 BROWARD		30 BEOWARD		Yes No
9. Name	and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name	TThews Kenneth 1	C. IR
MATTHEWS, KENN			82 Street A	Address (P.O. Box Number is Not Acceptable	9) .
360-1 PALM DRIVE			.52	2 Tivoli TRACE CI	Role # 205
NAPLES FL 33962			83		
•			84 City_	-	as Zio Codo
				eestiell Beach	FL 85 Zip Code 3 3 444 (
11. Pursuant to the provis	ions of Sections 617.0502 a	nd 617.1508, Florida Statutes	the above-named co	rooration submits this statement for the num	ose of changing its registered office
or registered agent, or familiar with, and acce	both, in the State of Florida of the obligations of Section	. Such change was authorized 617.0503. Florida Statutes	by the corporation's l	board of directors. I hereby accept the appoi	ntment as registered agent. I am
	Al I	West h			4/4/5/
SIGNATURE Signature typed	or printed name of registered agent an	d title if applicable NOTE	: Registered Agent signature re	quired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12
TITLE D		DELETE	1.1 TITLE		Change Addition
NAME MATTH	ews, Kenneth L Jr.		1.2 NAME		
STREET ADDRESS 360-1 F	ALM DRIVE		1.3 STREET ADDRESS		
	S FL 33962		1.4 CITY - ST - ZIP		
TITLE D		DELETE	21 TITLE	T T	☐ Change ☐ Addition
NAME GLASE	MANN, ROBERT		2.2 NAME	1	
	RIVERBEND DRIVE		2.3 STREET ADDRESS		
41.544	ONTE SPRINGS FL 327	14		\/ /	
CITY-ST-ZIP ALTAM	OTTIC OF THIOOTIC OEF	DELETE	2 4 CITY-ST-ZIP	1 1 2	/ Change Addition
'''	ORTON	įJoete ie		anomas Un Ka	DCZYS Change Department
000 11	E. 24TH LANE		3 2 NAME	JAOMAS 197 Ros AThens, TH 37	2
CARE	CORAL FL 33909		3 3 STREET ADDRESS	ATHENS, IN ST	36.7
3.77 3.7 2.7	701ML 1 L 33303	DELETE	3 4. CITY - ST - ZIP		Channe Dadding
TITLE		Cherese	4 1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		ריין הייני	4.4 O TY-ST-ZIP	70000175 -04/29/96010	
TITLE		DELETE	5 1 TTLE	***C1	BZ+-U□pr g ge □ Addition
NAME			52 NAME	***61.25	
STREET ADORESS			5 3 S REET ADDRESS		
CITY-ST-ZIP			541 Y-ST-ZIP		
TITLE		DELETE	61 LE		Change Addition
NAME			62. ME		1 - 0 01
STREET ADDRESS			6 3 EET ADDRESS		4-28-26
CITY-ST-ZIP			6.4 ·ST-ZIP		
14. I do hereby certify that	t the information supplied wi	th this filing is voluntarily furnis	hed an pes not qua	lify for the exemption stated in Section 119.0	7(3)(k), Florida Statutes. I further