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

N9400001236 (8) DOCUMENT

THE ELECTRIC BOAT ASSOCIATION OF THE AMERICAS, I

FILED Feb 11 1997 8:00am Secretary of State



Principal Place	e of business	Malling Address						
522 TIVOLI TRACE CIRCLE DEERFIELD BEACH FL 33441		P.O. BOX 4151 DEERRFIELD BEACH FL 33442-4151						
					3. Date Incorporated or Qualified 03/14/1994	3a. Date of La 04/28	st Report /1996	
	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For	
		26			65-0470765		Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for Florida Statutes	for intangible tax under s. 199.032, Yes No		
9. Name and Address of Current Registered Agent			1301	10. Name and Address of New Registered Agent				
			81	Name	ne			
MATTHEWS, KENNETH L JR. 522 TIVOLI TRACE CIRCLE			82	Stree	et Address (P.O. Box Number is Not Acceptab	le)		
	LD BEACH FL 33441		83	1				
			84	City		FL 85	Zip Code	
11 Purcuent	to the provisions of Continue 617 060	22 and 617 1509. Florida State	doc the chou	D DOMO	and corporation submits this statement for the		na ito tanintarad	
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.								
•	m terrillar with, and accept the oblig	jations of, Section 617.0503, r	-ionda Statute	\$.				
SIGNATURE .	Signature, typed or printed name of registered ag-	ent and title if applicable. (NO	D1F: Registered Ag	ent signatu	ure required when reinstating)	DATE		
12. OFFICERS AND DIRECTORS 13			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12	
TITLE	D	DELETE	1.1 TITLE			Cha	nge 🔲 Addition	
NAME	MATTHEWS, KENNETH L JR.		1.2 NAME				ا سره د سه	
STREET ADDRESS	960-1-PALM DRIVE		1.3 STREE	T ADDRESS	SZZ TWOI TRACE Deerfield Beach, F	CIRCLE	TI 205	
CITY-ST-ZIP	NAPLES FL 33962		1.4 CITY-	ST - ZIP	Deerfield Beach, F	L 33441		
TITLE	D DELETE 2.1 T		2.1 TITLE			☐ Cha	nge 🔲 Addition	
NAME	ROBERTS, THOMAS A		2.2 NAME					
STREET ADDRESS	396 CR 197		2.3 STREE	T ADDRESS	s		ĺ	
CITY-ST-ZIP	ATHENS TN 37303		2. 4 CITY-	ST-ZIP				
TITLE	D DELETE		3.1 TITLE			☐ Cha	nge Addition	
NAME	ray, morton		3.2 NAME					
STREET ADDRESS	908 N.E. 24TH LANE		3 3 STREE	T ADDRESS	s		[
CITY-ST-ZIP	CAPE CORAL FL 33909		3.4. CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE			☐ Cha	nge Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS	s		ſ	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		DELETE	5.1 TITLE			☐ Cha	nge Addition	
NAME			5.2 NAME				ļ	
STREET ADDRESS			5.3 STREE	T ADDRESS	s			
CITY-ST-ZIP			5.4 CITY-	ST - ZIP			1	
TITLE		DELETE	6.1 TITLE			Cha	nge Addition	
NAME			6.2 NAME				J	
STREET ADDRESS			6.3 STREE	T ADDRESS	s			
CITY-ST-ZIP			6.4 CITY -	ST-ZIP				
14. I do heret	ov certify that the information supplie	ed with this filing does not qua	lify for the ex	emotion	stated in Section 119.07(3)(i), Florida Statute	L 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.