## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400003211 (9)

THE NATIONAL BUILDING PROTECTION COUNCIL, INC.

Principal Place of Business Mailing Address						0151 <b>00</b> 111 <b>03100</b> 11330 15001 1		
SUITE 520. 3300 PGA BLVD. SU			Gardens Plaza Bldg. Suite 520, 3300 pga Blvd. Palm Beach Gardens Fl 3341D-2810		Date Incorporated or Qualified	3a. Date of Last R	lenort	
					06/27/1994	06/28/19	96	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0552443	Ar	oplied For		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		05 0552445		ot Applicable		
22		27		5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Z <sub>i</sub> p Co		ry	8. This corporation has liability for intangible tax under s. 199.032,			
24 25 29 29 9, Name and Address of Current Registered Agent			30	Florida Statutes Yes No  10. Name and Address of New Registered Agent				
W. Hairle and Address of Current Registered Agent				1 Name				
EDRING	ron, robert e					1-2		
GARDENS PLAZA BLDG.			8	2 Street A	ddress (P.O. Box Number is Not Acceptab	ие)		
	20, 3300 PGA BLVD.		8	3				
PALM BEACH GARDENS FL 33410			В	4 City		<b>85</b> Zip	Code	
11 Purcuant	to the provisions of Sections 617.0	502 and 617 1508. Florida Stat	utes the abo	ve-named c	corporation submits this statement for the p	FL 100 Z.P	e registered	
Office or r	egistered agent, or both, in the St. m familiar with, and accept the ob-	ite of Florida. Such change wa	s authorized l	by the corpo	pration's board of directors. I hereby accep	of the appointment as	registered	
SIGNATURE	in tantilal with, and accept the ob	igulions of, occilor of 7.5500,	riorida otatol	03.				
	Signature, typed or printed name of registered		OTE: Registered A	gent signature re	equired when reinstating)	DATE		
12.		AND DIRECTORS	18.		ADDITIONS/CHANGES TO OFFIC	·		
TITLE	D FLOYD, CHARLES L	DELETE	1,1 T(TLE	\ \		☐ Change	Addition	
NAME CZOCCZ ADDDCCC	PLAZA STE. 520	1,2 NAM						
STREET ADDRESS 3300 PGA BLVD. GANDENS CITY-ST-ZIP PALM BCH. GARDENS FL 33				ET ADDRESS				
TITLE	D	DELETE	2.1 TITLE	-ST-ZIP		Change	Addition	
NAME	WYATT, WILLIAM R	_	2.2 NAM	1		,		
STREET ADDRESS 3300 PGA BLVD. GARDENS F		PLAZA STE. 520	23 STRE	ET ADDRESS				
CITY-ST-ZIP PALM BCH. GARDENS FL 334		33410	2. A CITY	r-ST-ZIP				
TITLE	D DELETE					☐ Change	Addition	
NAME				E				
STREET ADDRESS 3300 PGA BLVD. GARDENS PLAZA STE. 520 PALM BCH. GARDENS FL 33410				ET ADDRESS				
CITY-ST-ZIP	PALM BUH, GARDENS FL	DELETE	3.4. CITY 4.1 TITLE			Change	Addition	
NAME		otter	4, 1 (1) C		•	□ Cilarigo	[_] Addition	
STREET ADDRESS	•			ET ADDRESS		•		
CITY-ST-ZIP	,,		4.4 City			•		
TITLE		DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAM	E		•		
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY	- ST - ZIP			···	
TITLE		DELFTE	6.1 TITLE			☐ Change	Addilion	
NAME			6.2 NAM			i.		
STREET ADDRESS			6.3 STRE	ET ADDRESS				

14. I do 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 angual report of 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 certoral 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 12 or Block 13 or florida Statutes.