

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003273

**FILED**  
**Apr 01, 2004**  
**Secretary of State****Entity Name:** INTERNATIONAL CHIEF PETTY OFFICERS' ASSOCIATION 1995 CONVENTION CORPORATION OF FLORIDA**Current Principal Place of Business:**1270 BURNHAM AVE  
APT. #1001  
LAS VEGAS, NV 891045441 US**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 12328  
LAS VEGAS, NV 891120328 US**New Mailing Address:****FEI Number:** 31-1373182**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WOOLWEAVER, EDWARD T  
3210 JOLSON DR  
SARASOTA, FL 34237 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D ( ) Delete  
**Name:** JOHN MASSICOTTE,  
**Address:** 1932 MAGIC CANYON DR  
**City-St-Zip:** HENDERSON, NV 890158541**Title:** TD ( ) Delete  
**Name:** AHERN, PATRICIK H  
**Address:** 1270 BURNHAM AVE., APT #1001  
**City-St-Zip:** LAS VEGAS, NV 891041955**Title:** D ( ) Delete  
**Name:** JOHNSON, CLARENCE E  
**Address:** 53 SKYLINE DR  
**City-St-Zip:** MURPHY, NC 289063375**Title:** PD ( ) Delete  
**Name:** WOOLWEAVER, EDWARD T  
**Address:** 3210 JOLSON DR  
**City-St-Zip:** SARASOTA, FL 342375432**Title:** D ( ) Delete  
**Name:** CARALIVANOS, EMMANUEL H  
**Address:** 4 LEAVING MILL LANE  
**City-St-Zip:** MARLTON, NJ 080532707**Title:** SD ( ) Delete  
**Name:** KINSELLA, RONALD  
**Address:** 5900 NW 58TH TERRACE  
**City-St-Zip:** PARKLAND, FL 330674426**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK H. AHERN

TD

04/01/2004

Electronic Signature of Signing Officer or Director

Date