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May 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N94000005754 (6)

1. Corporation Name

MANDARIN PRESERVATION ASSOCIATION, INC.



Principal Place of Business

Mailing Address

10404 SYLVAN LANE WEST
JACKSONVILLE FL 32257

10404 SYLVAN LANE WEST
JACKSONVILLE FL 32257-6242

3. Date Incorporated or Qualified
11/21/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3310716

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LISSKA, EMILY R
10404 SYLVAN LANE WEST
JACKSONVILLE FL 32257

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 617.0502, Florida Statutes.

SIGNATURE Emily R. Lisska

Signature, typed or printed name of registered agent and title, if applicable.

Emily R. Lisska

(NOTE: Registered Agent Signature required when reinstating)

4/30/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME LISSKA, EMILY R
STREET ADDRESS 10404 SYLVAN LANE WEST
CITY-ST-ZIP JACKSONVILLE FL

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

32257

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME JETER, WILLIAM H
STREET ADDRESS 11138 SCOTT MILL ROAD
CITY-ST-ZIP JACKSONVILLE FL

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

32223

TITLE ☒ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME LEMLEY, CHARLES C
STREET ADDRESS 200 LAURA STREET
CITY-ST-ZIP JACKSONVILLE FL

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Dorothy Thenoils
11847 Loretto Woods Ct.
Jacksonville, FL 32223

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☒ Addition

NAME RAMEY, NANNETTE V
STREET ADDRESS 3478 FAIRBANKS ROAD
CITY-ST-ZIP JACKSONVILLE FL

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

322

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME DANIEL, RUTH
STREET ADDRESS 12851 MICANOPY LANE
CITY-ST-ZIP JACKSONVILLE FL 32223

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME DAVIS, CARL D
STREET ADDRESS 11647 HAMRICK PLACE
CITY-ST-ZIP JACKSONVILLE FL 32223

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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.

SIGNATURE Emily R. Lisska

4/30/97 (904)

CR2E037 (9/96)