FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State

1996	DIV	ISION OF CORPORATIONS		
DOCUMENT #	# N950000348	1 (7)		
UNITED STATES MARINE CORPS DRILL INSTRUCTORS ASS OCIATION OF JACKSONVILLE, INC.				
Principal Place of Business	Mailing Addre	SS	-	OBIES HILL BIEST FOIR! 1231 1981
1621 EMERSON STREET 1621 EMERSON STREET				
JACKSONVILLE FL 32207 JACKSONVILLE FL 32207				
			07/21/1995	Date of Last Report
2. Principal Place of Business 11 1/2/Emerson St 26 1/2/Emerson St			4. FEI Number 50-22105	Applied For Not Applicable
Suite, Apt. #, etc.			37-33-3100	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City State	III El Carlo Sta		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Jacksony	Country 28 /// (/	Sanville, Country	This corporation has liability for intangible	
**	15 USA 29 32	207 30 USH	Florida Statutes Yes	No
9. Name a	and Address of Current Registered Age	nt 81 Name	10. Name and Address of New Registered	J Agent
				
PECK, HIRON 1821 EMERSON STREET			ess (P.O. Box Number is Not Acceptable)	
JACKSONVILLE FL		83		
DI IOTO OTT I LEE	V4.	84 City		85 Zip Code
			F	
or registered agent, 🖋 🖰	ns of Sections 617.0502 and 617.1508, ric both, in the State of Floriday Such Mange w t the obligations of, Section 617.3503, Florid	as authorized by the corporation spoor	ation submits this statement for the purpose of c rd of directors. I hereby accept the appointment a	as registered agent. I am
	The obligation of the second o	Hiras H.	Eck 3-Z	8-96
SIGNATURE Signature typed of	r printed name of registered agent and little if application	(NOTE: Hagistered Agert signature require	DATE ADDITIONS CHANGES TO OFFICERS AF	
12.	OFFICERS AND DIRECTORS	13. DELETE 1111116	ADDITIONS CHARGES TO CITEDITION	Change Addition
NAME HISO	n H. PECK, Jr.	1.2 NAME		
STREET ADDRESS	Emerson St.	1 3 STREET ADDRESS		
CITY-ST-ZIP Jack	sonville FL 32.	207 14 CHY-ST-ZIP		
TITLE VICE.	President =	DELETE 21 THLE		Change Addition
NAME Willia	in Mc GRANE	2.2 NAME		
7	· Gardon St.	2 3 STREET ADDRESS 2 4 City-St-Zip		
TITLE DECEMBER	E PARK PL SZU	DELETE 31 TITLE		Change Addition
NAME D WILL	am Hux	3.2 NAME		
STREET ADDRESS 14410	Pend Diace	3.3 STREET ADDRESS		
CITY-ST-ZIP Jack	Prind Dirce Sonville FC 322	23 34 CITY-ST-ZIP		Change Addition
TITLE D Treas	sord E. LEIBH San Mateo Ave Sonville FL 32	DELETE 41 TITLE		L_I change L_I Addition
NAME Sant	San mater Ave	4 2 NAME 4 3 STREET ADDRESS		
STREET ADDRESS 1532 CITY-ST-ZIP Jack	Condition FC 32	207 4.4 CHY - S1 - ZIP		
TITLÉ		DELETE 51 TITLE		Change Addition
NAME		5 2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP DELETE 61 TITLE		Change Addition
TITLE NAME	k	62 NAME	9000018521 -06/05/9601078	143 1
STREET ADDRESS		6.3 STREET ADDRESS	+**61.25	1110
DITY OF 710		6.4 CITY - ST- ZIP		(' <
14. I do hereby certify that	the information supplied with this filing is vo	pluntarily furnished and does not qualify emental annual report is true and accur	for the exemption stated in Section 119.07(3)(k), rate and that my signature shall have the same leads report on required by Chapter 617. Florida State	Florida Statutes. I further gal effect as if made under
oath; that I am an office appears in Block 12 or	er or director of the corporation or the recei- Block 13 if changed, or on an attachment	or or trustee empowered to execute the with an address.	alle and that my signature shall have the same is not spin spin spin as required by Chapter 617, Florida Sta	itutes; and that my name