FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # N96000002744 (8)

AMERICAN DEFENSE SYSTEMS INTERNATIONAL EDUCATION AL FOUNDATION, INC.

						: [04/H]	1	
Principal Place of Business Mailing Address						- J 1841KIDI DIR KOND BUNK DONK DONK BEKKI BOKH ORNID IKRI JOBKI BIDIN OLDI KADI		
PO BOX 62053	3	PO BOX 620533 ORLANDO FL 32862-0533				3. Date Incorporated or Qualified		
ORLANDO FL 3	32962-0533					05/16/1996		
						4. FEI Number Applied For	_	
						59-3385909 Not Applica		
2. Principal Place of Business 2a. Mailing Address						E9.75 Addition	_	
21		26				5. Certificate of Status Desired		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be		
22		27				Trust Fund Contribution Added to Fees		
City & Stat	le	City & State				7. Is this nonprofit corporation a homeowners association?		
23		28				☐ Yes No		
Zip Country		Zip Country			This corporation owes or has pald the current year Intangible			
24	[25]	[29]	30			Personal Property Tax due June 30. Yes 🔀 No		
	9. Name and Address of Curr	ent Registered Agent		==1		10. Name and Address of New Registered Agent		
				81	Name			
CONNOLLY, JOSEPH F II				82	Street	Address (P.O. Box Number is Not Acceptable)		
4218 ARAJO CT.								
BELLE ISLE FL 32812-2807				83	l			
				84	City	85 Zip Code		
						FL		
11. Pursuant office or i	to the provisions of Sections 617.05 registered agent, or both, in the Sta	502 and 617.1508, Florida Stat te of Florida. Such channe wa	lutes, the at	DOVE	:-named	I corporation submits this statement for the purpose of changing its registers to retire board of directors. I bereby accept the appointment as registered	ed	
agent. I a	im familiar with, and accept the obli	gations of Saction 617.0503,	Florida Stat	utes	i.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	•	
SIGNATURE	Joseph Lung	~~~				780315		
12.	Signature, typed or printed name of registered a			i Age	nt signature	e required when reinstaling) DATE		
TITLE	D OFFICENS A	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addit	tion	
NAME	CONNOLLY, JOSEPH F II					Change LI Audit	liun	
STREET ADDRESS 4218 ARAGO COURT			1.2 NAME		1000000	USIR ARATO COURT		
CITY-SI-ZIP BELLE ISLE F		1.3 STREET AD			4218 ARAJO COURT BELLE ISLE, FL 32862-0533			
TITLE	D D	7		1.4 CITY - ST - ZIP		Change Addit	tion	
NAME	MURGADO, AMAURY	C Detter				Change	IIUri	
STREET ADDRESS	5651 COMMERCE DR., STE.	0	2.2 NA		1000000			
1	ORLANDO FL	y			ADDRESS	1		
CITY-ST-ZIP TITLE	D D	☐ DELETE	2. 4 CI 3.1 Til		I-ZIP	Change Addit	tion	
NAME	CONNOLLY, DONNA C				İ		TIOH	
STREET ADDRESS	5651 COMMERCE DR., STE.	0	3.2 NA					
	ORLANDO FL	8			ADDRESS			
CITY-ST-ZIP	ONDANDO FL	DELETE	3.4. CI 4.1 Til		1-ZIP	Change Addit	tion	
NAME		beech	4.1 M			Citatigo 🗀 Additi	JUII	
STREET ADDRESS					+D0DF00			
					ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CIT		I-ZIP	☐ Change ☐ Addit	tion	
NAME			5.1 MA			Change C Addition	ווטו.	
STREET ADDRESS					4000500			
					ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TIT		I-ZIP	Change Additi	tion	
"""		L.J VECEIE	0.1 []]	ıt		Li Change Li Additi	NOI1	

14. I 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.

STREET ADDRESS

SIGNATURE:

980315

407.859.5013

FILED

Mar 26 1998 8:00am

Secretary of State

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