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May 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000003716 (5)**

1. Corporation Name

**ISPI INCORPORATED-SOUTH FLORIDA GOLD COAST CHAPT
ER**

Principal Place of Business

Mailing Address

**6072 EAGLES NEST DR
6072 EAGLE'S NEST DRIVE
JUPITER FL 33458
US**

**6072 EAGLES NEST DR
6072 EAGLE'S NEST DRIVE
JUPITER FL 33458
US**



3. Date Incorporated or Qualified

07/11/1996

4. FEI Number

59-2687131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**SWAROOP, VICTOR
9626 NW 48 ST
SUNRISE FL 33351**

10. Name and Address of New Registered Agent

81 Name

**Caspar, Marianne
82 Street Address (P.O. Box Number is Not Acceptable)
6072 Eagle's Nest Drive**

83

84 City

Jupiter

FL

85 Zip Code
33458

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 617.0503, Florida Statutes.

SIGNATURE Marianne M. Caspar
Signature, typed or printed name of registered agent and title, if applicable

MARIANNE M. CASPAR
(NOTE: Registered Agent signature required when reinstating)

4/28/98
DATE

12. OFFICERS AND DIRECTORS

TITLE **VPD** ☒ DELETE

NAME **CASPAR, MARIANNE**
STREET ADDRESS **6072 EAGLES NEST DR**
CITY-ST-ZIP **JUPITER FL**

TITLE **S** ☒ DELETE

NAME **BEBKO, PHYLLIS**
STREET ADDRESS **1515 WEST COMMERCIAL BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE **PD** ☒ DELETE

NAME **SWAROOP, VICTOR**
STREET ADDRESS **9626 NW 48TH ST.**
CITY-ST-ZIP **SUNRISE FL**

TITLE **DT** ☒ DELETE

NAME **MCGIBNEY, PEGGY**
STREET ADDRESS **11023 SW 15 MANOR**
CITY-ST-ZIP **DAVE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **V/D** ☐ Change ☒ Addition

1.2 NAME **LUPTON, LAURA**
1.3 STREET ADDRESS **7584 NW 70th WAY**
1.4 CITY-ST-ZIP **PARKLAND, FL 33067**

2.1 TITLE **D** ☐ Change ☒ Addition

2.2 NAME **NOUREDDIN, LOUBNA**
2.3 STREET ADDRESS **19370 COLLINS AVE., 1508C**
2.4 CITY-ST-ZIP **N. MIAMI BEACH, FL 33160**

3.1 TITLE **D** ☐ Change ☒ Addition

3.2 NAME **JOSEPHSON, JAN**
3.3 STREET ADDRESS **10790 NW 14 Street, 187**
3.4 CITY-ST-ZIP **PLANTATION, FL 33322**

4.1 TITLE **T/D** ☐ Change ☒ Addition

4.2 NAME **BUCKLEY, SUSAN**
4.3 STREET ADDRESS **1013 WOODFIELD CIRCLE**
4.4 CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

5.1 TITLE **P/D** ☒ Change ☐ Addition

5.2 NAME **CASPAR, MARIANNE**
5.3 STREET ADDRESS **6072 EAGLE'S NEST DRIVE**
5.4 CITY-ST-ZIP **JUPITER, FL 33458**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: Marianne M. Caspar 4/28/98

561-744-3142

CR2E037 (10/97)