

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N96000004275 (1)

1. Corporation Name

CUBAN/LATIN AMERICAS CONTINGENCY COMMISSION, INC

Principal Place of Business

Mailing Address

1006 NORTH WOODLAND BLVD.
DELAND FL 32720

C/O MICHAEL AVERY
BOX 603
DELAND FL 32721-0603

FILED
Sep 30 1998 8:00am
Secretary of State



3. Date Incorporated or Qualified

08/13/1996

4. FEI Number

59-3436846

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

KELLY, WILLIAM C
1006 NORTH WOODLAND BLVD.
DELAND FL 32720

10. Name and Address of New Registered Agent

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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
P
AVERY, MICHAEL
BOX 603 N/A
DELAND FL 32720

TITLE NAME ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
V
COLEMAN, JAMES F
POST OFFICE DRAWER 449
DELAND FL 32721

TITLE NAME ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
S
KOTAS, TODD E
8837 LEGEND CLUB
WEST PALM BEACH FL 32117

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
T
KELLY, WILLIAM C
1006 NORTH WOODLAND BLVD.
DELAND FL 32720

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME ☐ Change ☒ Addition

1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D
PIMEGLIO, MICHAEL
200 S. ORANGE AVE
ORLANDO, FL

2.1 TITLE 2.2 NAME ☒ Change ☐ Addition

2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
S
COLEMAN, JAMES F.
POST OFFICE BOX 449 N/A
DELAND, FL 32721

3.1 TITLE 3.2 NAME ☐ Change ☒ Addition

3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
D
LEVI, DARIN
9327 DANGY ST
GOTHA, FL 34784

4.1 TITLE 4.2 NAME ☐ Change ☒ Addition

4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
D
ROSETTI, DANIEL
305 ROOSE DR.
ORMOND BEACH, FL

5.1 TITLE 5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day Daytime Phone #

CR2E037 (5/98)