FILE NOW: FILING FEE IS $61.25

APPROVED AND FILED

98 JAN 15 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT

~~1997~~

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

DOCUMENT # N96000004675 (2)

1. Corporation Name
1317 ASSOCIATION, INC.

1998

Principal Place of Business	Mailing Address
4875 N. FEDERAL HIGHWAY 10TH FLOOR FORT LAUDERDALE FL 33308	4875 N. FEDERAL HIGHWAY 10TH FLOOR FORT LAUDERDALE FL 33308-4626

3. Date Incorporated or Qualified: 09/10/1996
3a. Date of Last Report: 1ST Report

2. Principal Place of Business
21 1317 SW 1ST AVE.
Suite, Apt. #, etc. 22
City & State 23 FT. LAUDERDALE, FL
Zip 24 33315 Country 25 BROWARD

2a. Mailing Address
26 SAME
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number — 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

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

9. Name and Address of Current Registered Agent

LEONARD, C. GLENN
4875 N. FEDERAL HIGHWAY
10TH FLOOR
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name: DAVID A. PODGERSON
82 Street Address (P.O. Box Number is Not Acceptable): 1317 SW 1ST AVE.
83 1317 ASSOCIATION, INC
84 City: FT. LAUDERDALE FL 85 Zip Code: 33315

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 617.0504, Florida Statutes.

SIGNATURE: C. Glenn Leonard — 1-8-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HAMILTON, DENNIS		1.2 NAME	
STREET ADDRESS	401 N.W. 118TH AVENUE		1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HAMILTON, JAMES		2.2 NAME	
STREET ADDRESS	401 N.W. 118TH AVENUE		2.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324		2.4 CITY-ST-ZIP	
TITLE		☑ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LEONARD, C. GLENN		3.2 NAME	
STREET ADDRESS	4875 N. FEDERAL HIGHWAY, 10TH FLOOR		3.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	DAVID A. PODGERSON		4.2 NAME	
STREET ADDRESS	1317 SW 1ST AVE.		4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. Lauderdale, FL. 33315		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

300002403433--9
-01/16/98--01095--002
*****61.25 *****61.25

D. Alan
Jan. 15, 1998

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: C. Glenn Leonard — 1-8-97