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Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000005521 (7)**

1. Corporation Name

FILIPINO-AMERICAN ASSOCIATION OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

**4595 PALM BEACH BLVD
FT MYERS FL 33905**

Mailing Address

**4595 PALM BEACH BLVD
FT MYERS FL 33905-3400**



3. Date Incorporated or Qualified
10/29/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0698502

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

10. Name and Address of New Registered Agent

**TORIO, ISABELO S
4595 PALM BEACH BLVD
FT MYERS FL 33905**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**P
NICASIO M. DAVID, M.D.
4595 PALM BEACH BLVD.
FT. MYERS, FL 33905**

TITLE ☐ DELETE

**V.P.
DIONISIO BUGARIN, M.D.
1909 SE 33RD TER.
FT. MYERS, FL 33904**

TITLE ☒ DELETE

**S
ANABELLA MORRELL
6841 SHADY PINE LANE
BOKELIA, FL 33922**

TITLE ☐ DELETE

**T.
VICTORIA DAVID
5089 Northampton DR
FT MYERS, FL 33919**

TITLE ☐ DELETE

**D.
TONY Santa Maria
13805 WHITE HAVEN LANE
FT MYERS, FL 33912**

TITLE ☐ DELETE

**D.
ISABELO S. TORIO, M.D.
209 SE 40th ST.
CAPE CORAL, FL 33904**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**S.
NENE KAYMAN
6784 Highland Place Pine CIR.
FT. MYERS, FL 33912**

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

Sandra B. Mortham

3-25-97

CR2E037 (9/96)