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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

S61339

(5)

AMERICAN MEDIATION ASSOCIATION-FLORIDA, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Meiling Address ARASOTA FL 3442 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Ob/20/1991 A. FEI Number Mol Applied For Set Suits April 8, etc. 22 Suits April 8, etc. 23 Suits April 8, etc. 25 Suits April 8, etc. 27 Curviy Mol Applied For Fee Required City & State
SARASOTA FL 34242 \$ARASOTA FL 34242 \$Principal Place of Business 28. Mailing Address 29. Mailing Address 29. Mailing Address 30. Date Incorporated or Qualified 06/20/1991 4. FEL Humber 30. Date Incorporated or Qualified 06/20/1991 4. FEL Humber 30. Applied For 65-02692855 30. Not Applied For Required City & State City & State City & State City & State 27. City & State 28. To Country 29. Country 29. Country 29. Country 29. Country 30. This corporation owes or has pad the current year. Added to Fees 29. Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent 27. Address of Current Registered Agent 28. Street Address (P.O. Box Number is Not Acceptable) 29. Name and Address of New Registered Agent 29. Street Address (P.O. Box Number is Not Acceptable) 30. Street Address (P.O. Box Number is Not Acceptable) 30. Street Address (P.O. Box Number is Not Acceptable) 30. Street Address (P.O. Box Number is Not Acceptable) 30. Street Address (P.O. Box Number is Not Acceptable) 31. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statuties 30. Street Address (P.O. Box Number is Not Acceptable) 31. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statuties 30. Street Address (P.O. Box Number is Not Acceptable) 32. Street Address (P.O. Box Number is Not Acceptable) 33. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. This desired Agent displaced when retraining in the statement for the purpose of changing its register of purpose agent. Lam femiliar with, and accept the objectives agent and the fagilistic and the fa
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27 City & State 28 27 City & State 6. Election Campaign Financing 55.00 May Be and Added to Fees 7.00 May Be and Added to Fees 7.00 May Be and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and A
Trust Fund Contribution
Zip 25 29 30 20 29 30 20 20 20 20 20 20 20
28
TWICK, WILLIAM S. 8448 SANDERLING RD. SARASOTA FL 34242 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. Tam familiar with, and accept the appointment as registered agent agent. Tam familiar with and accept the appointment as registered agent age
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SARASOTA FL 34242 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its register 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 registere agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: Tyled or printed name of registered agent and still agracable (NOTE: Registered Agent signature required when rehating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME ZWICK, WILLIAM S. STREET ADDRESS GITY-ST-ZIP TITLE DELETE 1.3 STREET ADDRESS GITY-ST-ZIP ARASOTA FL 1.4 CITY-ST-ZIP TITLE DELETE 2.2 NAME STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP ARASOTA FL 1.5 TITLE DELETE 3.1 TITLE Change Addit Addit Addit Addit Addit Addit AMME STREET ADDRESS
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Interest certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 toperator or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an ettachment with an address.