FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 700189   (4)

1. Corporation Name

ROSALIND CLUB OF ORLANDO

Principal Place of Business	Mailing Address
C/O BYRON R. CARTER. 250 N. ORANGE AVE NCNB BANK BLDG. POB 752 ORLANDO FL 32802-0752	C/O BYRON R. CARTER. 250 N. ORANGE AVE NCNB BANK BLDG. POB 752 ORLANDO FL 32802-0752

3. Date Incorporated or Qualified	3a. Date of Last Report
04/10/1917	02/26/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-0539680	Applied For / Not Applicable
21	26		

Suite, Apt. #, etc.	Suite, Apt #, etc.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
22	27		

City & State	City & State	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
23	28		

Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
24	25	29	30	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CARTER, BYRON R 1425 NCNB BANK BLDG. PO BOX 752 ORLANDO FL 32802	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 **P**	☐ DELETE	1.1 TITLE **P**	☐ Change	☐ Addition
NAME **BRANDEL, JOHN P.**		1.2 NAME **BRANDEL, John P. Mrs.**		
STREET ADDRESS **1904 ESPANOLA DRIVE**		1.3 STREET ADDRESS **1904 Espanola Dr.**		
CITY-ST-ZIP **ORLANDO FL**		1.4 CITY-ST-ZIP **Orlando, FL 32804**		
TITLE **V**	☐ DELETE	2.1 TITLE **V**	☐ Change	☐ Addition
NAME **STINE, JON**		2.2 NAME **STINE, Jon Mrs.**		
STREET ADDRESS **2019 SIESTA LANE**		2.3 STREET ADDRESS **2019 Siesta Lane**		
CITY-ST-ZIP **ORLANDO FL**		2.4 CITY-ST-ZIP **Orlando, FL 32804**		
TITLE **DS**	☐ DELETE	3.1 TITLE **DS**	☐ Change	☒ Addition
NAME **ALLEN, WALTON G.**		3.2 NAME **EIDSON, Ann**		
STREET ADDRESS **1619 BIMINI DRIVE**		3.3 STREET ADDRESS **2029 Country Side Circle N.**		
CITY-ST-ZIP **ORLANDO FL**		3.4 CITY-ST-ZIP **Orlando, FL 32802**		
TITLE **D**	☐ DELETE	4.1 TITLE **D**	☐ Change	☐ Addition
NAME **PRICE, KARICK A.**		4.2 NAME **ALLEN, Walter G., Jr. Mrs.**		
STREET ADDRESS **3659 NORTHGLENN DRIVE**		4.3 STREET ADDRESS **1619 Bimini Drive**		
CITY-ST-ZIP **ORLANDO FL**		4.4 CITY-ST-ZIP **Orlando, FL 32806**		
TITLE **DT**	☒ DELETE	5.1 TITLE **DT**	☐ Change	☐ Addition
NAME **DUCKWORTH, SEDGWICK**		5.2 NAME **GRIST, John M. Mrs.**		
STREET ADDRESS **417 E. HILLCREST**		5.3 STREET ADDRESS **810 Alemeda Street**		
CITY-ST-ZIP **ALTAMONTE SPRINGS FL**		5.4 CITY-ST-ZIP **Orlando, FL 32804**		
TITLE **D**	☐ DELETE	6.1 TITLE **D**	☐ Change	☐ Addition
NAME **GRIST, JOHN M.**		6.2 NAME **PRICE, Karick A. Mrs.**		
STREET ADDRESS **810 ALEMEDA STREET**		6.3 STREET ADDRESS **3659 Northglenn Dr.**		
CITY-ST-ZIP **ORLANDO FL**		6.4 CITY-ST-ZIP **Orlando, FL 32806**		

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: _____

CR2E037 (9/96)