

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 706219 (3)**  
1. Corporation Name  
**SOUTH SEMINOLE SERTOMA CLUB INC.**



Principal Place of Business <b>P.O. BOX 743 WINTER PARK FL 32790-0743</b>	Mailing Address <b>P.O. BOX 743 WINTER PARK FL 32790-0743</b>
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3. Date Incorporated or Qualified <b>09/30/1963</b>	
4. FEI Number <b>59-1088658</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

**9. Name and Address of Current Registered Agent**

**ELBERT, EDWARD A  
3978 IRMA SHORES DR.  
ORLANDO FL 32817**

**10. Name and Address of New Registered Agent**

<b>81</b> Name	
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)	
<b>83</b>	
<b>84</b> City	<b>85</b> Zip Code

**FL**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>Kendall, Christopher</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <del>CONTI, DONALD</del>		1.2 NAME <b>7245 Abbey Lane</b>	
STREET ADDRESS <b>1036 PEBBLE BEACH CIRCLE E</b>		1.3 STREET ADDRESS <b>Winter Park FL 32792</b>	
CITY-ST-ZIP <b>WINTER SPRING FL</b>		1.4 CITY-ST-ZIP	
TITLE <b>VD</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>Bloom, Jerald A.</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <del>KENDAL, CHRISTOPHER</del>		2.2 NAME <b>224 W Long Creek Cove</b>	
STREET ADDRESS <b>7245 ABBEY LANE</b>		2.3 STREET ADDRESS <b>Longwood FL 32750</b>	
CITY-ST-ZIP <b>WINTER PARK FL</b>		2.4 CITY-ST-ZIP	
TITLE <b>S</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SPAKOWSKI, WILLIAM</b>		3.2 NAME	
STREET ADDRESS <b>120 GLENDALE DR.</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>LONGWOOD FL 32750</b>		3.4 CITY-ST-ZIP	
TITLE <b>T</b>	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>ELBERT, EDWARD A.</b>		4.2 NAME	
STREET ADDRESS <b>3978 IRMA SHORES DR.</b>		4.3 STREET ADDRESS	
CITY-ST-ZIP <b>ORLANDO FL</b>		4.4 CITY-ST-ZIP	
TITLE <b>C</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE <b>C Conti Donald</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <del>WINEBURG, BEVERLY</del>		5.2 NAME <b>1036 Pebble Beach Cr. E</b>	
STREET ADDRESS <b>1303 HILLWAY RD.</b>		5.3 STREET ADDRESS <b>Winter Springs FL 32708</b>	
CITY-ST-ZIP <b>APOPKA FL</b>		5.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KUHN, THOMAS</b>		6.2 NAME	
STREET ADDRESS <b>183 PAUL MCCLURE CT.</b>		6.3 STREET ADDRESS	
CITY-ST-ZIP <b>CASSELBERRY FL 32707</b>		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: *Ed A. Elbert* **Edward A. Elbert Tax 1-8-98 (407) 678-5725**

CR2E037 (1097)



## SOUTH SEMINOLE SERTOMA CLUB

P.O. BOX 743 • WINTER PARK, FLORIDA 32790

Document # 706219

Additions: Item 12

D.  
~~12.~~ Prestera, Gene  
308 MacGregor Rd.  
Winter Springs FL 32708

D. Wentz, William  
2507 Dakota Tr.  
Fern Park FL 32730