FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 10 PM 1:58

DOCUMENT # 719959 (9)

1. Corporation Name
EXECUTIVE ASSOCIATION OF GREATER ORLANDO, INC.

Principal Place of Business	Mailing Address
5104 NO ORANGE BLOSSOM STE 114G ORLANDO FL 32810 US	5104 N. ORANGE BLOSSOM TRAIL #218 ORLANDO FL 32810 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/30/1970
3a. Date of Last Report: 03/11/1994
4. FEI Number: 59-1466562 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 c/o Classe Marketing	26 c/o Classe Marketing
Suite, Apt. #, etc. 22 3319 Maguire Blvd., #155	Suite, Apt. #, etc. 27 3319 Maguire Blvd #155
City & State 23 Orlando, Florida	City & State 28 Orlando, FLorida
Zip / Country 24 32803 / 25 USA	Zip / Country 29 32803 / 30 USA

9. Name and Address of Current Registered Agent

JUERGENSEN, WALT
5695 BEGGS RD
ORLANDO FL 32810

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstated.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	D ☒ Change ☐ Addition
NAME	JUERGENSEN, WALT	1.2 NAME	Juergensen, Walt
STREET ADDRESS	5695 BEGGS RD	1.3 STREET ADDRESS	5695 Beggs Raod
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, FL
TITLE	V	2.1 TITLE	P/D ☒ Change ☐ Addition
NAME	DAVIS, RANDY	2.2 NAME	Davis, Randy
STREET ADDRESS	2445 LEE RD	2.3 STREET ADDRESS	2445 Lee Road
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP	~~Winter Park, FL~~
TITLE	D	3.1 TITLE	D/S/T ☒ Change ☐ Addition
NAME	MILLER, BOB	3.2 NAME	Miller, Bob
STREET ADDRESS	2600 MAITLAND CTR PKWY #162	3.3 STREET ADDRESS	2600 Maitland Ctr Prky #162
CITY-ST-ZIP	MAITLAND FL	3.4 CITY-ST-ZIP	~~Maitland, FL~~
TITLE	D	4.1 TITLE	D ☒ Change ☐ Addition
NAME	LIFF, GERRY	4.2 NAME	Brewer, Janet
STREET ADDRESS	300 E NEW ENGLAND AVE	4.3 STREET ADDRESS	1100 E. Colonial Drive
CITY-ST-ZIP	WINTER PARK FL	4.4 CITY-ST-ZIP	~~Orlando, FL~~
TITLE	D	5.1 TITLE	D ☒ Change ☐ Addition
NAME	CASON, MARCIA	5.2 NAME	Romano, Joe
STREET ADDRESS	7600 DR PHILLIPS BLVD, STE 64	5.3 STREET ADDRESS	2560 E. Colonial Drive #59
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	~~Orlando, FL~~
TITLE	ST	6.1 TITLE	D ☒ Change ☐ Addition
NAME	HEIDRICH, PAUL	6.2 NAME	Heidrich, Paul
STREET ADDRESS	1950 MIZELL AVE	6.3 STREET ADDRESS	1950 Mizell Avenue
CITY-ST-ZIP	WINTER PARK FL	6.4 CITY-ST-ZIP	~~Winter Park, FL~~

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: _____ Randy Davis 1-24-95 407-657-8118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0014000