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FILED
May 16 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 # 735971 (4)
1. Corporation Name
MERIDIAN CLUB OF WINTER PARK, INC.



Principal Place of Business % WINDERWEEDLE HAINES WARD & WOODMAN, P.A. 250 PARK AVENUE SOUTH, 5TH FLOOR WINTER PARK FL 32789	Mailing Address % WINDERWEEDLE HAINES WARD & WOODMAN, P.A. 250 PARK AVENUE SOUTH, 5TH FLOOR WINTER PARK FL 32789-4388
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3. Date Incorporated or Qualified 06/01/1976	3a. Date of Last Report 02/27/1996
4. FEI Number 59-1691696	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**MCCAGHREN, C. BRENT
250 PARK AVENUE SOUTH, 5TH FLOOR
WINTER PARK FL 32789**

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 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

TITLE PD	SHURTLEFF, MICHAEL E. 941 S. PENNSYLVANIA AVE. WINTER PARK FL 32789	<input checked="" type="checkbox"/> DELETE (as president only)
TITLE VD	LUCKETT, PAUL E. 1021 FAIRWAY DRIVE WINTER PARK FL 32792	<input type="checkbox"/> DELETE
TITLE TD	MALOY, JOHN RICK 5307 JESSAMINE LANE ORLANDO FL 32839	<input type="checkbox"/> DELETE
TITLE SD	DUFFY, ROBERT P 4005 EMERRYWOOD LANE ORLANDO FL 32812	<input checked="" type="checkbox"/> DELETE (as secretary only)
TITLE D	NOFSINGER, ROGER B 609 MAITLAND AVE., #1 ALTAMONTE SPRINGS FL 32714	<input checked="" type="checkbox"/> DELETE
TITLE D	DALSEMER, PATRICK 240 EAST KINGS WAY WINTER PARK FL	<input checked="" type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P	Jay Leahy 962 Cobbler Court Longwood, FL 32750	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE VP	Ian C. Donkin 819 Towering Oak Way Apopka, FL 32712	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE S	William Watson 1417 Cardinal Road Orlando, FL 32803	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE D	Brent McCaghren 433 E. New England Ave. Winter Park, FL 32789	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE D	Al Loudermilk 455 Melrose Avenue Winter Park, FL 32789	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE D	Bob Duffy 5000 Simmons Road Orlando, FL 32812	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: _____ **REQUIRED** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0012314

CR2E037 (9/96)