

FILE NOW: FILING FEE IS \$61.25

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90045 035 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 756386

1. Corporation Name
 Electrolysis Society of Florida, Inc. ✓

Principal Place of Business 4550 Palmetto Ave. Winter Park Florida 32792	Mailing Address 4550 Palmetto Ave Winter Park Florida 32792
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2. Principal Place of Business 21 4550 Palmetto Ave Suite, Apt. #, etc. 22 Ste. 102 City & State 23 Winter Park, Florida Zip Country 24 32792 25 Orange	2a. Mailing Address 26 4550 Palmetto Ave Suite, Apt. #, etc. 27 Ste. 102 City & State 28 Winter Park, Florida Zip Country 29 32792 30 Orange	3. Date Incorporated or Qualified 2-16-1981	4. FEI Number 59-2184313 ✓ Applied For 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	

9. Name and Address of Current Registered Agent Sharon M. Cimorelli 1 Florida Park Drive # 320 Palm Coast Fl. 32137	10. Name and Address of New Registered Agent 81 Name Hildegard Scott 82 Street Address (P.O. Box Number is Not Acceptable) 4550 Palmetto Ave 83 Ste. 102 84 City Winter Park FL 85 Zip Code 32792
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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: Hildegard Scott Hildegard Scott 4-25-99
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 <input checked="" type="checkbox"/> DELETE	NAME: Judy Adams	1.1 TITLE: President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 651 A1A Beach Blvd - A	CITY-ST-ZIP: St. Augustine Beach Fl.	1.2 NAME: Ginger Hutson	
		1.3 STREET ADDRESS: 3616 S. Johns Avenue	
		1.4 CITY-ST-ZIP: Jacksonville, Fl. 32205	
TITLE: <input checked="" type="checkbox"/> DELETE	NAME: Montleagudo, Bobbie	2.1 TITLE: DV 2nd Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 7800 Red Rd. #103	CITY-ST-ZIP: South Miami Fl.	2.2 NAME: Farelta, Lucille	
		2.3 STREET ADDRESS: 209 Country Club Road	
		2.4 CITY-ST-ZIP: Lake Mary, Fl. 32746	
TITLE: <input checked="" type="checkbox"/> DELETE	NAME: Hodge, Natividad	3.1 TITLE: Williamson, Michele <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 4321 Maserati Street	CITY-ST-ZIP: Sebring, Fl. 33872	3.2 NAME: 800 Paul Street, Suite B	
		3.3 STREET ADDRESS: Orlando, Fl. 32808	
		3.4 CITY-ST-ZIP:	
TITLE: <input checked="" type="checkbox"/> DELETE	NAME: Sharon Cimorelli	4.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS: 1 Florida Park Drive #320	CITY-ST-ZIP: Palm Coast, Fl. 32137	4.2 NAME: Scott, Hildegard	
		4.3 STREET ADDRESS: 4550 Palmetto Ave Ste. 102	
		4.4 CITY-ST-ZIP: Winter Park Fl. 32792	
TITLE: <input type="checkbox"/> DELETE	NAME: Hermansen, Karen	5.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 10692 S. U.S. 1, Suite C	CITY-ST-ZIP: Port St. Lucie, Fl. 34952	5.2 NAME: Hodge Natividad	
		5.3 STREET ADDRESS: 4321 Maserati Street	
		5.4 CITY-ST-ZIP: Sebring Fl. 33872	
TITLE: <input checked="" type="checkbox"/> DELETE	NAME: Musgrave, Deborah	6.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
STREET ADDRESS: 1405 S. Orange Ave. Suite 501	CITY-ST-ZIP: Orlando Fl. 32806	6.2 NAME: Judy Adams	
		6.3 STREET ADDRESS: 651 A1A Beach Blvd - A	
		6.4 CITY-ST-ZIP: St. Augustine Beach Fl. 32084	

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, with all other like empowered.

SIGNATURE: Hildegard Scott 4-25-99 407-657-6006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)