

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N93000003273 (0)**
1. Corporation Name

LONGWOOD SCOUTING ASSOCIATION, INC.

Principal Place of Business Mailing Address
117 WEST WYNDHAM COURT LONGWOOD FL 32779 **117 WEST WYNDHAM COURT LONGWOOD FL 32779**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
07/21/1993	05/01/1994
4. FEI Number	Applied For
59-3310945	Not Applicable
NOT APPLICABLE	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	\$68.75 Supplemental Fee Not Required
<input checked="" type="checkbox"/>	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. P.O. Box 915176
22. City & State	27. State, Apt. #, etc.
23. City & State	28. Longwood FL 32791-5176
24. Zip	29. 32791-5176

9. Name and Address of Current Registered Agent
**DAVIS, WINSTON R.
117 WEST WYNDHAM COURT
LONGWOOD FL 32779**

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 607.150B, 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BIRKEMEYER, KEITH V.	1.2 NAME	
STREET ADDRESS	115 PINECREST DRIVE	1.3 STREET ADDRESS	
CITY, ST, ZIP	SANFORD FL 32773	1.4 CITY, ST, ZIP	
TITLE	STD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, WINSTON R.	2.2 NAME	
STREET ADDRESS	117 WEST WYNDHAM CT.	2.3 STREET ADDRESS	
CITY, ST, ZIP	LONGWOOD FL 32779	2.4 CITY, ST, ZIP	
TITLE	D	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAYARD, ALICE	3.2 NAME	
STREET ADDRESS	150 CAKE DESTINY TRAIL	3.3 STREET ADDRESS	
CITY, ST, ZIP	ALTAMONTE SPRINGS FL 32714	3.4 CITY, ST, ZIP	
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAYARD, RAY	4.2 NAME	
STREET ADDRESS	150 LAKE DESTINY TRAIL	4.3 STREET ADDRESS	
CITY, ST, ZIP	ALTAMONTE SPRINGS FL 32714	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	D
STREET ADDRESS		5.3 STREET ADDRESS	CHOWANTEC, JOHN
CITY, ST, ZIP		5.4 CITY, ST, ZIP	346 SHADOW BAY NORTH LONGWOOD FL 32779
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

Deposited by Bank *rc*

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), 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. I am an officer or director of the corporation or trustee or trustee-in-possession to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an alternate report with an address.

SIGNATURE: *Winston R. Davis* WINSTON R. DAVIS, SECRETARY/DIR MAY 15, 1995
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(407)869-6115

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

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APPROVED
AND
FILED

07/23/95 11:09:03

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N93000003407 (4)**

SENIOR NETWORKING, INC.

900001534699
-07/18/95--01040--021
*****70.00 *****70.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
311 N KNOWLES AVENUE SUITE 401 WINTER PARK FL 32789	311 N KNOWLES AVENUE SUITE 401 WINTER PARK FL 32789

3. Date Incorporated or Qualified 07/23/1993	3a. Date of Last Report 03/08/1994
4. FEI Number 59-3196831	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Has the Corporation been in Liquidation or Receivership <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	FILING FEE IS \$61.25
8. This corporation has liability for intangible tax under s. 198 U.S. Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

THARP, THELMA
311 N KNOWLES AVE
#401
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. City	
84. City	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 617.0503 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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. AGENT FOR CHANGING REGISTERED OFFICE AND AGENT FOR REGISTERING	
11. TITLE PTD	11. NAME THARP, THELMA	11. TITLE PTDS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. STREET ADDRESS 311 N KNOWLES, #401	12. NAME THARP THELMA	12. STREET ADDRESS THARP THELMA	
13. CITY, ST, ZIP WINTER PARK FL 32789	13. STREET ADDRESS	13. CITY, ST, ZIP	
14. TITLE VD	14. NAME FIDLER, MELANIE	14. TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
15. STREET ADDRESS 1754 DENMAN DRIVE	15. NAME WARREN BRIDGES	15. STREET ADDRESS 2110 Frederica Drive	
16. CITY, ST, ZIP APOPKA FL 32703	16. STREET ADDRESS Orlando, FL 32812	16. CITY, ST, ZIP Orlando, FL 32812	
17. TITLE VD	17. NAME FIDLER, JEFFREY	17. TITLE VD (same)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
18. STREET ADDRESS 311 N KNOWLES, #401	18. NAME FIDLER, JEFFREY	18. STREET ADDRESS 3411 Limetree Drive	
19. CITY, ST, ZIP WINTER PARK FL 32789	19. STREET ADDRESS Edgewater, FL 32141	19. CITY, ST, ZIP Edgewater, FL 32141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
20. TITLE SD	20. NAME WILLOUGHBY, THOMAS M	20. TITLE ABBY SUNABIA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
21. STREET ADDRESS 2239 COVENTRY DR	21. NAME WILLOUGHBY, THOMAS M	21. STREET ADDRESS 8714A Silver Star Rd	
22. CITY, ST, ZIP WINTER PARK FL 32702	22. STREET ADDRESS WINTER PARK FL 32702	22. CITY, ST, ZIP Orlando FL 32808	
23. TITLE D Mary Bugnacki	23. NAME D Mary Bugnacki	23. TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
24. STREET ADDRESS 5419 Spaatz Ave	24. NAME Gary Bugnacki	24. STREET ADDRESS 5419 Spaatz Ave	
25. CITY, ST, ZIP Orlando 32839	25. STREET ADDRESS Orlando 32839	25. CITY, ST, ZIP Orlando 32839	
26. TITLE VD	26. NAME Kon Gillette	26. TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
27. STREET ADDRESS	27. NAME Kon Gillette	27. STREET ADDRESS 2905 Lakeview Drive	
28. CITY, ST, ZIP	28. STREET ADDRESS	28. CITY, ST, ZIP Fern Park, FL 32730	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1110.07(3)(b), Florida Statutes. I further certify that the information included 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 officer 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 of this report or on an attachment with an address.

SIGNATURE: *TheLma Tharp* 6-13-95 407-740-6838
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (3/95)

Senior Networking



Fax 407-740-0159 Thelma Tharp, Producer
311 N. Knowles Avenue, Winter Park, FL 32789 (407) 740-6823

BOARD OF DIRECTORS
6/19/95

The Board of Directors met on 6/15/95 to accept the resignation of Thomas Willoughby a Director and Secretary and to welcome new members to the Board of Directors.

It was agreed that Thelma Tharp will assume the duties of Secretary along with President and Treasurer.

Additions to the Board of Directors were duly noted and included in the notes of the meeting.

Additions to the Board are:

VD Warren Bridges of 2110 Frederica Drive
Orlando FL 32812

VD Ken Gilette 2905 Lakeview Drive
Fern Park FL 32730

VP Gary Bugnacki 5419 Spaatz Avenue
Orlando, Fl 32839

D Mary Bugnacki 5419 Spaatz Avenue
Orlando, Fl 32839

D Abby Sunabia 3714A Silver Star Road
Orlando, Fl 2808

Continuing as Board Members are:

PTSD Thelma Tharp 311 N. Knowles Ave. Apt 401
Winter Park, Fl 32789

VD Melanie Fidler 1754 Denman Drive
Apopka, Fl 32703

VD Jeffrey Fidler noted a change of address
new address:
3411 Limetree Drive
Edgewater FL 32141

Thelma Tharp
Secretary

Senior Networking



Fax 407-740-0159
311 N. Knowles Avenue, Winter Park, FL 32789

Thelma Tharp, Producer
(407) 740-6823

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Our intent is to provide a radio information service for our Senior population. Our telephone number is provided on every show and we invite our listeners to telephone us whenever they have a problem with which they need help. We aim to provide them with information about all aspects of our community life that is of interest to them. We believe Florida to be the most compassionate State in the union but our Seniors are not very good at searching out the services and entertainment available to them, without help.

Senior Networking is also there to provide our Senior population with a voice to protest or cheer the happenings at local, state, or national levels. The show airs on WHOO 990 ON THE am band every Sunday morning from 8 to 9.

Since there was no further business the meeting ended.

Signed:

Thelma Tharp
Secretary