

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004326 (3)

1. Corporation Name

TURNING POINT OF CENTRAL FLORIDA, INC.



Principal Place of Business

Mailing Address

861 WEST MORSE BLVD., SUITE 250
WINTER PARK FL 32789

861 WEST MORSE BLVD., SUITE 250
WINTER PARK FL 32789

3. Date Incorporated or Qualified
09/12/1995

3a. Date of Last Report
9-12-1995

2. Principal Place of Business

2a. Mailing Address

21 1408 Gay Road

26 1408 Gay Rd

4. FEI Number

59-3344663

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23 Winter Park FL

28 Winter Park, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 32789

25 orange

29 32789

30 orange

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KINZLER, GERARD P
861 WEST MORSE BLVD., SUITE 250
WINTER PARK FL 32789

81 Name

Gerard P. Kinzler

82 Street Address (P.O. Box Number is Not Acceptable)

1408 Gay Road

83

84 City

Winter Park FL

FL

85 Zip Code

32789

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

Gerard P. Kinzler
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-20-96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME MOGUL, MAX
STREET ADDRESS 861 WEST MORSE BLVD., SUITE 250
CITY-ST-ZIP WINTER PARK FL 32789

TITLE D ☒ DELETE
NAME WEST, B.J.
STREET ADDRESS 1511 EAST ROBINSON STREET
CITY-ST-ZIP ORLANDO FL 32801

TITLE D ☒ DELETE
NAME BOUCH, JOSEPH
STREET ADDRESS 1155 LOUISIANA AVE., SUITE 101
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

President
James H. Strack (D)
P.O. Box 533908
Orlando FL 32853

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Vice President
Dr. Frederick Pearl (D)
830 E Hwy 434 Suite 1
Longwood, FL 32750

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Sas. Treasurer
Key Howard (D)
414 Seymour Court
Orlando, FL 32765

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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-03/13/96--01113-014

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

***61.25

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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)(k), 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:

Gerard P. Kinzler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-96 (407) 740-5655
Date Daytime Phone #

CR2E037 (12/95)