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FILED  
Apr 27 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N24166 (3)

1. Corporation Name

ORLANDO AREA THEATRE ORGAN SOCIETY, INC.

Principal Place of Business

Mailing Address

549 KAREN AVENUE  
ALTAMONTE SPRINGS FL 32701  
US

16 COBBLESTONE COURT  
CASSELBERRY FL 32707  
US

3. Date Incorporated or Qualified

12/30/1987

4. FEI Number

59-2914026

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

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. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TILSCHNER, WAYNE  
549 KAREN AVENUE  
ALTAMONTE SPRINGS FL 32701

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

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 DP  
NAME TILSCHNER, WAYNE  
STREET ADDRESS 549 KAREN AVE  
CITY-ST-ZIP ALTAMONTE SPRINGS FL

☐ DELETE

TITLE SD  
NAME FERRAR, DORIS B  
STREET ADDRESS 115 WOODLAND DRIVE  
CITY-ST-ZIP LEESBURG FL

☐ DELETE

TITLE D  
NAME THOMAS, WARREN  
STREET ADDRESS 5939 KENDREW  
CITY-ST-ZIP PT ORANGE FL

☐ DELETE

TITLE TD  
NAME HENSING, HAZEL B.  
STREET ADDRESS 16 COBBLESTONE COURT  
CITY-ST-ZIP CASSELBERRY FL

☐ DELETE

TITLE VPD  
NAME BOWER, RON  
STREET ADDRESS 105 WHIPPERWILL DRIVE  
CITY-ST-ZIP ALTAMONTE SPRINGS FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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

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

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

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

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

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

D  
TILSCHNER, WAYNE  
549 KAREN AVE  
ALTAMONTE SPRINGS FL

☒ Change

☐ Addition

VPD  
THOMAS, WARREN  
5939 KENDREW  
PORT ORANGE FL

☐ Change

☐ Addition

VPD  
THOMAS, WARREN  
5939 KENDREW  
PORT ORANGE FL

☒ Change

☐ Addition

PD  
BOWER, RON  
105 WHIPPERWILL DRIVE  
ALTAMONTE SPRINGS FL

☐ Change

☐ Addition

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105 WHIPPERWILL DRIVE  
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☒ Change

☐ Addition

PD  
BOWER, RON  
105 WHIPPERWILL DRIVE  
ALTAMONTE SPRINGS FL

☐ Change

☐ Addition

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.

SIGNATURE: HAZEL B. HENSING 04-07098

CP2E037 (10/97)

ORLANDO AREA THEATRE ORGAN SOCIETY, INC.  
549 KAREN AVENUE  
ALTAMONTE SPRINGS FL 32701

FEI NUMBER  
59-2914026

COMPLETE LIST OF OFFICERS AND DIRECTORS AS OF MARCH 15, 1998

President/Director  
Bower, Ron  
105 Whipperwill Drive  
Altamonte Springs FL 32701

Vice President/Director  
Thomas, Warren  
5939 Kendrew  
Port Orange FL 32127

Secretary/Director  
Ferrar, Doris M.  
115 Woodland Drive  
Leesburg FL 34788

Treasurer/Director  
Hensing, Hazel B.  
16 Cobblestone Court  
Casselberry FL 32707

Director  
Cole, Susan L.  
1211 Old Highway 441  
Mount Dora FL 32757

Director  
Jeerings, Don  
3456 Futch Road  
Plant City FL 33566

Director  
Laval, Juliette M.  
70 Lucerne Circle - #1002  
Orlando FL 32801

Director  
Neilsen, Edward G.  
2500 S. Gleneagles Drive  
Deland FL 32724

Director  
Tilschner, Wayne  
549 Karen Avenue  
Altamonte Springs FL 32701