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Apr 28 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 # 703348 (3)

1. Corporation Name
AVON PARK SENIOR ACTIVITIES CENTER, INC.

Principal Place of Business	Mailing Address
109 E MAIN ST AVON PARK FL 33825-3944 US	P O BOX 1221 AVON PARK FL 33826 US

3. Date Incorporated or Qualified: 12/19/1961

4. FEI Number: 59-6561010 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 109 E. Main St. (Suite, Apt. #, etc.)	26 PO Box 1221 (Suite, Apt. #, etc.)
22	27
City & State: 23 Avon Park, FL 33823	City & State: 28 Avon Park, FL 33825
Zip: 24 33825-3904 Country: 25 USA	Zip: 29 33825 Country: 30 USA

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
POLLOCK, BILL 1264 W BELL ST 1640 S. SCENIC HWY., #26 FROSTPROOF FL 33843	81 Name: Wendell Lutes 82 Street Address (P.O. Box Number is Not Acceptable): 507 E. Riviera St. 83 84 City: Avon Park, FL 85 Zip Code: 33825

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: Wendell Lutes 400002503754 04/28/98 01103-027 DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POLLOCK, BILL 1640 S. SCENIC HWY., #26 FROSTPROOF FL 33843	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition PD Wendell Lutes 507 E. Riviera St. Avon Park, FL 33825
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FVD BETTS, WILMA 1850 US 27 S., Q42 AVON PARK FL 33825	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition FVD George Von Drak 7 Forest Hills Ct. Avon Park, FL 33825
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD COX, TIMOTHY 1446 MELROSE DR. AVON PARK FL 33825	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition VD Dick Davis 605 S. Florida Ave. Avon Park, 33825
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PLUMMER, ELIZABETH 5 SUNSHINE LANE AVON PARK FL 33825	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition SD Floyann Frey 500 US 27 S. Lot 64, Frostproof, 33843
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOBSON, ELDON 3912 THUNDERBIRD HL CIRCLE SEBRING FL 33872	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☒ Change ☐ Addition TD Evelyn Livingston 45 Forest Hills Ct., Avon Park, 33825 4/6/98
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOWNEY, SHIRLEY E 297 1/2 LAKE AVE #24 FROSTPROOF FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☒ Change ☐ Addition D Adelle Lehman 14 W. Raymond St., Avon Park 33825

CR2E037 (10/97)

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: Treasurer/Evelyn Livingston Evelyn Livingston 4-6-98