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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **703270** (9)

1. Corporation Name

LINCOLN-MERCURY DEALERS' ADVERTISING FUND, ORLANDO REGION, INC.

Principal Place of Business

Mailing Address

**12 E SUNRISE BLVD
FT LAUDERDALE FL 33304
US**

**P. O. BOX 550538
JACKSONVILLE FL 32255-0538
US**

3. Date Incorporated or Qualified

11/28/1961

4. FEI Number

59-6064616

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROBBINS, WILLIAM C.
2800 PARR COURT WEST
JACKSONVILLE FL 32245-9098**

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 ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME

OSMAN, PERRY

STREET ADDRESS

625 E NASA BLVD

CITY-ST-ZIP

MELBOURNE FL

1.2 NAME

CD

1.3 STREET ADDRESS

JOEL HAMILTON

1.4 CITY-ST-ZIP

**12 E. SUNRISE BLVD.
FT. LAUDERDALE, FL**

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME

SCHAEFER, JOHN

STREET ADDRESS

4001 PONCE DE LEON BLVD.

CITY-ST-ZIP

CORAL GABLE FL

2.2 NAME

D

2.3 STREET ADDRESS

JERRY YORK

2.4 CITY-ST-ZIP

**350 BEAL PARKWAY
FT. WALTON BEACH, FL**

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME

UNDERHILL, BILL

STREET ADDRESS

2372 S. TAMAMI TRAIL

CITY-ST-ZIP

VENICE FL

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

LYNCH, WILLIAM B.

STREET ADDRESS

4620 SOUTHSIDE BLVD.

CITY-ST-ZIP

JACKSONVILLE FL

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

MURPHY, DENNIS

STREET ADDRESS

4727 U.S. HWY 19

CITY-ST-ZIP

NEW PORT RICHEY FL

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☒ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

DARNELL, ED

STREET ADDRESS

641 W. 15TH STREET

CITY-ST-ZIP

PANAMA CITY FL

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

SIGNATURE REQUIRED

CR2E037 (10/97)