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Mar 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 705655 (9)

1. Corporation Name
AMERICAN LUNG ASSOCIATION OF CENTRAL FLORIDA, IN C.

Principal Place of Business	Mailing Address
2737 S FERNCREEK AVE ORLANDO FL 32806	P O BOX 568504 ORLANDO FL 32856-8504 US

3. Date Incorporated or Qualified: 05/23/1963
3a. Date of Last Report: 03/25/1996

2. Principal Place of Business
21 1333 W. Colonial Drive
Suite, Apt. #, etc. 22
City & State 23 Orlando, Fl
Zip 24 32804-7133 Country 25 USA

2a. Mailing Address
26 1333 W. Colonial Drive
Suite, Apt. #, etc. 27
City & State 28 Orlando, Fl
Zip 29 32804-7133 Country 30 USA

4. FEI Number: 59-1007076 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent

WELCH, STEPHANIE A
2737 S FERNCREEK AVE
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name: Hutchinson, Stephanie A.
82 Street Address (P.O. Box Number is Not Acceptable): 1333 W. Colonial Drive
83
84 City: Orlando FL 85 Zip Code: 32804-7133

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 _____ 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	TD	☐ DELETE	1.1 TITLE	TD	☒ Change ☒ Addition
NAME	MAHAFFEY, DICK D		1.2 NAME	Menard, Dennis	
STREET ADDRESS	305 TURKEY RUN		1.3 STREET ADDRESS	819 Riverbend Blvd.	
CITY-ST-ZIP	WINTER PARK, FL 00000		1.4 CITY-ST-ZIP	Longwood, Fl 32779	
TITLE	PD	☐ DELETE	2.1 TITLE	D	XX Change ☐ Addition
NAME	MCCORMICK, JOHN M		2.2 NAME	McCormick, John M.	
STREET ADDRESS	648 WORTHINGTON DRIVE		2.3 STREET ADDRESS	648 Worthington Dr.	
CITY-ST-ZIP	WINTER PARK FL		2.4 CITY-ST-ZIP	Winter Park, Fl 32789	
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, DANIEL B.		3.2 NAME		
STREET ADDRESS	1605 ASHER LN.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE	VD	☒ Change ☐ Addition
NAME	ALIDINA, LAILA, M.D.		4.2 NAME	Moore, Kathryn H., R.N.	
STREET ADDRESS	7130 SHADYWOOD LANE		4.3 STREET ADDRESS	11512 Lake Katherine Cir.	
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP	Clermont, Fl 34711	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BAILEY, HARRY B.		5.2 NAME		
STREET ADDRESS	5118 DARDEN AVENUE		5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 00000		5.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	6.1 TITLE	PD	☒ Change ☐ Addition
NAME	KANE, DONNE		6.2 NAME	Kane, Donne	
STREET ADDRESS	2104 VENETIAN WAY		6.3 STREET ADDRESS	2104 Venetian Way	
CITY-ST-ZIP	WINTER PARK FL		6.4 CITY-ST-ZIP	Winter Park, Fl 32789	

CR2E037 (9/96)

14. I do 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: Donne Kane 3/20/97 (407) 628-3199

AMERICAN LUNG ASSOCIATION OF CENTRAL FLORIDA
BOARD OF TRUSTEES (Cont'd)

Alidina, Laila, M.D.	7130 Shadywood Lane	Orlando 32811
Bell, Yvonne E, R.N.	4329 Steed Terrace	Winter Park 32792
Blackwood, Lillian S., C.R.T.T.	2930 Sandwell Drive	Winter Park 32792
Burnell, Teri', R.Ph.	3378 Whispering Pine Trail	Deland 32724
Chandra, Subrato, Ph.D.,	4824 Lonsdale Cir.	Orlando 32817
Coleman, Robert	719 Park Lake Cir.	Orlando 32803
Hahn, Katy	780 Meadowlark Court	Longwood 32750
Herbst, Nathalie	716 Jamestown Blvd. #2267	Alta. Springs 32714
Johnston, Alan D., M.D.	5232 Oak Island Road	Orlando 32806
Kerlin, Wiley C.	3319 S.E. 4th Street	Ocala 34471
Koontz, Linda	10520 S.E. 138th Place	Summerfield 34491
Livingston, Floyd, M.D.	8039 Bayside View Drive	Orlando 32819
Lynch, Ronald, M.D.	912 Red Fox Road	Alta Springs 32714
Lytle, J. Stephen, M.S., R.R.T.	339 Sandpiper Drive	Casselberry 32707
Mahaffey, Dick D. Jr.	4528 S.W. 97th Terrace	Gainesville 32608
Myers, Myrna L.	P.O. Box 5336	Ocala 34478
Newman, Peri R.	1683 Lakehurst Avenue	Winter Park 32789
Norris, Jim	1322 Ensenada Blvd.	Orlando 32836
Quinn, Iris	108 McKay Blvd.	Sanford 32771
Richardson, Chris M.	P.O. Box 550467	Orlando 32855
Souliere, Claire Y., R.N.C.	30245 Harris Dr.	Leesburg 34748
Ward, Cheryl, CRTT, R.N.	114 Candlewick Road	Alta Springs 32714