## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 01, 2004 8:00 am Secretary of State **DOCUMENT # 706219** 1. Entity Name 04-01-2004 90034 034 \*\*\*\*61.25 SOUTH SEMINOLE SERTOMA CLUB INC. Principal Place of Business Mailing Address P.O. BOX 743 WINTER PARK FL 32790-0743 P.O. BOX 743 WINTER PARK FL 32790-0743 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1088658 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ELBERT, EDWARD A Street Address (P.O. Box Number is Not Acceptable) 3978 IRMA SHORES DR. ORLANDO FL 32817 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition COHTI, DONALD Tom Kuhn NAME NAME 1036 PEBBLE BEACH CR. E STREET ADDRESS 183 Paul McClure Ct. STREET ADDRESS CASSELBERRY FL 32707 CITY - ST-ZIP CITY-ST-ZIP Casselbarry FL 32707 TITLE Delete TITLE Change Addition Vacant KUHN, THOMAS NAME NAME 183 PAUL MCCLURE CT. STREET ADDRESS STREET ADDRESS CASSELBERRY FL 32707 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition SPAKOWSKI, WILLIAM NAME Beverly wir 1303 Hillu 120 GLENDALE DR. STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ■ Addition ELBERT, EDWARD A. NAME NAME 3978 IRMA SHORES DR. STREET ADDRESS STREET ADDRESS ORLANDO FL 32817 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ■ Addition CHAN, KEYLOR -NAME NAME 533 THOMES CIRCLE DR STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Addition ☐ Change OCHS, ROBERT D NAME NAME 2813 SUMMER FIELD RD. STREET ADDRESS STREET ADDRESS WINTER PARK FL 32792 CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 report or supplemental 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 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

FILED



## SOUTH SEMINOLE SERTOMA CLUB

P.O. BOX 743 • WINTER PARK, FLORIDA 32790

Column 10 Continued (Additions)

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Rocs, William C 107 Modrid Dr. Casselborry FL 32707

Barbara, will D.
1860 Mohican Tr.
Maitland FL 32751