NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 709132

1. Corporation Name

EASTER SEAL SOCIETY OF EAST CENTRAL FLORIDA, INC

Principal Place of Business 3661 S. BABCOCK ST. MELBOURNE FL 32901-8221

Mailing Address

3661 S. BABCOCK ST. MELBOURNE FL 32901-8221

FILED Feb 26, 1999 8:00 am § Secretary of State

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COMMISSION IN COLUMN 1			BIL GIGH BIRS B	I B 21 D I B 12 18 B 2
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		K	#21 #1#II #1#II #	

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2. Principal F	Place of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 06/15/1965							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					4. FEI Number				ied For	
22		27					59-08817 <u>58</u>			Not	Applicable	
City & State		City & State			5. Certificate of Status Desired	sired \$8.75 Additional Fee Required						
23 Zip	Country	Zip	Cou	ntry			6. Election Campaign Financing		\$5.	.00 N	lay Be	
24	25	29	30				Trust Fund Contribution		Add	ded to	Fees	
<u></u>]	9. Name and Address of Current Registered Agent						10. Name and Address of New F	egistered	Agent			
3. Italia and Addioso of Carlotti Hogister Carlog											·	
BELLA APRILA I						82 Street Address (P.O. Box Number is Not Acceptable)						
REAM, GERALD L					Street A	Address	(P.O. Box Number is Not Accepta	ible)				
	ABCOCK ST			83								
MELBOUR	RNE FL 32901											
				84	City		-	FI	85	Zip Co	ode	
	2500	1017 1500 51 11- 51-11-		<u> </u>			tion submits this etatement for the			o its r	egistered	
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		_	Agen	t signature re	dured wh	en reinstating) ADDITIONS/CHANGES TO OF		ND DIRE	CTOE	S IN 12	
12.	OFFICERS AND		13.			DC	ADDITIONS/CHANGES TO CI	·	XX Cha		Addition	
TITLE	DC	XX DELETE	1.1 TI		1		mura p poopecui		11,710110			
NAME	MOISAND, DAN		1.2 N	_			THIA R DROPESKI					
STREET ADDRESS	1361 BEDFORD DR #103		1.3 S1	TREET	ADDRESS	680	EAU GALLIE BLVD				,	
CITY-ST-ZIP	MELBOURNE FL	1.40	1.4 CI	TY-ST	r-ZIP	MEL	BOURNE, FL					
TITLE	DVC	XX DELETE	2.1 TI	TLE	1	DVC			Cha	ınge	XX Addition	
NAME	DROPESKI, CYNTHIA		2.2 N	AME.	Ì	BRU	CE REEDER				}	
STREET ADDRESS	FALL OALLIE BLUD		2.3 S	TREET	ADDRESS	249	5 WICKHAM ROAD	•				
CITY-ST-ZIP	MELBOURNE FL		2,40	TY-S	T-ZIP	MEI	BOURNE, FL	_				
TITLE	DPC	XX DELETE	3.1 TI			2DV			Cha	inge	⊠ ★ddition	
NAME	FOUGEROUSSE, PHILLIP	•	3.2 N	AME		_	ERT WILLMARTH					
STREET ADDRESS			3.3 ST	TREET	ADDRESS		NAYLOR DRIVE					
CITY-ST-ZIP	MELBOURNE FL		34.C	:ITY-S	T-ZIP		ELBOURNE, FL					
TITLE	DT	XX DELETE	4.1 TI	_		DT			Cha	ange	XXddition	
NAME	ROUB, BRYAN		4.2N				TT KRASNY					
STREET ADDRESS	ARREST MARKET STATE				ADDRESS		HARBOR CITY BOULE	CVARD.	SU#7	re 2	:01	
	MELBOURNE FL 32919			ITY-SI				, , , ,	0023			
CITY-ST-ZIP TITLE	SD	XX DELETE	5.1 Ti		1-417	DS	BOURNE, FL		Cha	ange	Addition	
	1 77		5.2 N				D CHARLEN			-	ALI	
NAME	GILLILAND, JOY		1		ADDRESS		E STARLING					
STREET ADDRESS				TY-S1			BOX 372978			-		
CITY-ST-ZIP	MELBOURNE FL 32935	[7] DELETE	6.1 TI		1-2IF	SAI	ELLITE BEACH, FL		☐ Cha	ange	Addition	
TITLE	PCEO	☐ DELETE							ال ال	go		
NAME	REAM, GERALD L		6.2 N		I					,		
STREET ADDRESS	1		6.3 S	TREET	ADDRESS							
	MELDOLIDME EL 22004		64 C	ITV. ST	T. 7IP .		•		•			

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 suppliemental 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 an antachment with an address, with all other like empowered.

SIGNATURE:

PEQUGERATO L. Ream

5 January 99

(407) 723-4474