FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1998		7.7	Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
	MENT # 713478	B (6)							
ST. RIC	CHARD'S CHURCH					i eddill idlat tidak siya didir edd	ar saus Grāti	#16x1 B. G.L. Sagat 4	
Principal Place of Business Mailing Address						1 100111 10001 11010 (IIII 0101 1000	41 (8 14 919 11)	41811 BIU11 BIB11 G	hati Aifii taat
5151 ŁAKE HOWELL ROAD 5151 LAKE HOWELL ROAD WINTER PARK FL 32792-1027 WINTER PARK FL 32792-102				27		3. Date Incorporated or Qualified 10/17/1967			
						4. FEI Number		A	pplied For
3 D-1-1-10	Nees of Dunioses	On Maritime Address				<u>59-0863669</u>			lot Applicable
21 Principal P	rlace of Business	2a. Mailing Address				5. Certificate of Status Desired			Additional Regulated
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.				6. Election Campaign Financing		\$5.00	
City & State	<u> </u>	City & State				Trust Fund Contribution		Added 1	
23	•	28			Ì	7. Is this nonprofit corporation a	homeown	ners association	ነባ?
Zip	Country	Zip	Coun	iry		8. This corporation owes or has	pald the c	current year In	
24	9. Name and Address of Curren	29	30			Personal Property Tax due Ju- ID. Name and Address of New I			X No
	. Haine and Address of Curren	it uediateien väelit		1 Name		U. Hailio Eliu Audioss Ol Itom I	Johistole	C MOOIIC	
GARVIN, GRAYSON B.			, a	2 Street	t Addrass	(P.O. Box Number is Not Accept	ahla)		
4394 WEEPING WILLOW CIR						TI TO BOX HOMBON TO HOTOLOGO			
CASSELBERRY FL 32707				3					
				4 City			F	85 Zip	Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statu	ites, the abo	ve-name	d corpora	tion submits this statement for the			its registered
office or r agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was ations of, Section 617.0503, F	authorized lorida Statul	by the co	rporation'	s board of directors. I hereby acc	ept the a	ppointment as	registered
SIGNATURE									
12.	Signature, typed or printed name of registered age OFFICERS ANI		TE: Registered /	gent signatur	re required w	then reinstating) ADDITIONS/CHANGES TO OFF	DATE		RS IN 12
TITLE	D	DELETE	1.1 TITL					Change	Addition
NAME	KUECZYNSKI, GERALD		1.2 NAME						
STREET ADDRESS	1002 MCCALL CT		1.3 STR	ET ADDRESS	:]				
CITY-\$T-ZIP	OVIEDO FL		1.4 CITY	-ST-ZIP	ļ				
TITLE	D	☐ DEL e te	2.1 TITL					☐ Change	☐ Addition
NAME	GARVIN, GRAYSON B		2.2 NAM		1				
STREET ADDRESS	4394 WEEPING WILLOW CIR CASSELBERRY FL			ET ADORESS	1				
CITY-ST-ZIP TITLE	T	DELETE	3.1 TITL	-ST-ZIP	-			Change	Addition
NAME	POOLE, DENICE	14	3.2 NAM		DAV	10 5 HOLLAND			
STREET ADDRESS	603 SPRING ISLAND WAY			ET ADDRESS	8001	ip 5. HOLLAND b Nashya fana Indo, FL 32817-			
CITY-ST-ZIP	ORLANDO FL		3.4. CITY	-ST-ZIP	Orla	Indo FL 32817-	1249	<u>'</u>	
TITLE	D	☐ DELETE	4.1 TITLI					Change	Addition
NAME	RODE, MARK		4. 2 NAN						
STREET ADDRESS	1736 GRINNELL TERR.		′	et address	i				
CITY-ST-ZIP TITLE	WINTER PARK FL	DELETE	4.4 CITY 5.1 TITLE		 			Change	Addition
NAME		- OLECT	5.1 tile					Diango	
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			5.4 CITY						
TITLE	,	☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAM	Ē					
STREET ADDRESS			6.3 STRE	et address	1				

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:

CITY-ST-ZIP

TREASUREL

(401) 894-6803

FILED

Mar 13 1998 8:00am