

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 27 PM 4:22

DOCUMENT # 715831

(4)

1. Corporation Name

SERTOMA CLUB OF ORLANDO, INC.

Principal Place of Business

Mailing Address

401 W COLONIAL DRIVE
P. O. BOX 2483
ORLANDO FL 32802

401 W COLONIAL DRIVE
P. O. BOX 2483
ORLANDO FL 32802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1969

3a. Date of Last Report

01/20/1994

4. FEI Number

59-6213291

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARTER, BILL
401 E. JACKSON ST., STE. #101
ORLANDO, FL
32801

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renouncing)

DATE

William J. Garity WILLIAM J. GARTY 1-18-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME NORRIS, GREGORY C.
STREET ADDRESS 5996 BENT PINE DR., #3201
CITY-ST-ZIP ORLANDO FL

1.1 TITLE ☐ Change ☐ Addition

TITLE PD
NAME FORNEY, CYNTHIA
STREET ADDRESS 107 MADRID DR.
CITY-ST-ZIP ORLANDO FL

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE V
NAME WINNER, BRUCE
STREET ADDRESS 9313 RAVEN DELL ST.
CITY-ST-ZIP ORLANDO FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE VD
NAME GARTY, WILLIAM J.
STREET ADDRESS 6053 LEXINGTON PARK
CITY-ST-ZIP ORLANDO FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE D
NAME MCCALL, JOHN R.
STREET ADDRESS 933 WEDGEWOOD DR
CITY-ST-ZIP WINTER SPRINGS FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE D
NAME WISE, JOHN W.
STREET ADDRESS 1582 PINEHURST DR.
CITY-ST-ZIP CASSELBURY FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William J. Garity WILLIAM J. GARTY

1-18-95

(Date)

(Signature/Name #)